

**College of Engineering and Computing**  
**Office of Research**

**Department Request for Background Affiliate,  
Student, Volunteer, Special Circumstance Form Only**

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**Person to be Screened**

**Name:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_

**Type of Person:**

Student       Affiliate       Volunteer       Other

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**Provide complete PeopleSoft Funding Full Chartstring information:**

OPER UNIT	DEPT	FUND	CLASS	BUSINESS UNIT	PROJECT	ACTIVITY	COST SHARE

**Requested By:** \_\_\_\_\_ **Date:** \_\_\_\_\_