

UTHStart Subcontractor Personnel Request Form

Submit completed form to systemsreporting@uth.tmc.edu

UTHStart Record Number *

Entity Name *

Note: If the subcontractor/entity isn't available in UTHStart, please submit a subcontract request form

Subcontract PI Name (First & Last) *

Subcontract PI eRA Commons ID*

Subcontract PI Full Address*

Subcontractor Contact Name

Note: this is the contact at the organization NOT the name of the UTHealth contact/person submitting this form

Subcontractor Contact Phone

Subcontractor Contact Email

Comments