



Indirect Cost Waiver Form

(Please see attached budget for additional details)

Applicant(s): _____

Department/Division: _____ Agency: _____

Proposal Title: _____

Budget Projections: *(To be prepared by the Office for Research and Sponsored Projects)*

	Total Direct Costs	IDC Rate	Total IDC Charged	Total Project Costs
Full IDC	\$	%	\$	\$
Reduced/Waived IDC	\$	%	\$	\$
Difference		%	\$	\$

Comments: *(Do not leave this block empty)*

Explain the necessity and benefit to LMU in waiving IDC. The justification, such as we have always waived IDC for this sponsor, will not be considered an adequate reason for continuing to do so.

Approvals:

Principle Investigator (PI)

Executive Vice President and Provost *Thomas Poon*