Controlled Substances

Authorized Agent List

Office of Research Integrity
University Hall Suite 540
51 Goodman Street, Cincinnati, OH 45221-0663

University of CINCINNATI

Principal Investigator Name	**Storage Location – Building and Room**	**DEA Registration Number**
Registrant Name (if different than Principal Investigator)	**Storage Location – Postal Address**	

- Complete the information requested below. Submit to the college of department of the registration holder (or their responsible program administrator).
- Keep a copy with your controlled substances records. Update personnel changes immediately (e.g. strike out departed individuals and note their date of departure).
- The signature of the DEA Research Registration Holder ("registrant") certifies that the designated the persons are permitted to act as Authorized Agents with access to controlled substances at the storage location listed above on and after the date provided.

Authorized Agent Information *To be completed by Authorized Agent only.*				**Registrant Authorization** *To be completed by Registrant only.*	
Full Name (Print or Type)	Legal Signature	UC ID Number (M#)	Initials	Date Authorized	Signature