NRG ONCOLOGY

Advancing Research. Improving Lives.™

Site Attribute Form

This form is to be used to add or change site attributes on the NRG Oncology roster.
For questions, please contact Membership at 412-339-5292
Please email completed form to roster@nrgoncology.org.

Section 1: Enter the Main Member/NCORP/LAPS CTEP ID Number and Name below.	
Main Member/NCORP/LAPS CTEP ID:	
Main Member/NCORP/LAPS Name:	
Section 2: Complete the applicable information below that needs added or changed.	
Tax Identification number (EIN):	

Please advise if your institution is listed as a Teaching Hospital on the CMS Website

http://www.cms.gov/Regulations-and-Guidance/Legislation/National-Physician-Payment-Transparency-Program/Teaching-Hospitals.html

☐ Yes
☐ No

Payee Name *(Institution that checks are to be made payable to)*	
Legal Entity Name *(Entity authorized to enter into a contract on behalf of the Main Member/NCORP/LAPS)*	
Legal Entity Address (line 1)	
Legal Entity Address (line 2)	
City, State, Country, Zip	
Section 3: Approvals	
Required for all requests *except* Payee Name Change.	
Printed Name of Lead RA or Co-Lead RA	
Signature of Lead RA or Co-Lead RA	
Date (MM/DD/YYYY)	
Required for Payee Name Change *only*	
Printed Name of Fiscal or Contract/Grants Contact	
Signature of Fiscal or Contract/Grants Contact	
Date (MM/DD/YYYY)	
Please email completed forms to roster@nrgoncology.org	

For NRG Oncology Use Only		
Approved by: **Date:**	**Processed by:** **Date:**	**Scanned:** **Date:**