This form must be filled out when submitting your CFI proposal to the Institutional Programs, Research Services. *This document is used for internal purposes only.*

Principal Investigator:   Phone:

Title of Application:

Did you review this application with your Department Head and/or Dean?  □ Yes  □ No

Will the requested infrastructure be used for research involving:

- Human Subjects  □ YES  □ NO  Requirements: Human ethics certificate
- Database containing personal information  □ YES  □ NO  Requirements: Human ethics certificate
- Care and treatment of animals  □ YES  □ NO  Requirements: Animal ethics certificate
- Biohazards  □ YES  □ NO  Requirements: Biosafety operating permit
- Radioactive Materials  □ YES  □ NO  Requirements: Nuclear substances permit
- Possible Adverse Impact on the environment  □ YES  □ NO  Requirements: Contact Department of Health Safety & Environment
- Facilities in the in Yukon Nunavut, Northwest Territories  □ YES  □ NO  Requirements: License
- Clinical Trials  □ YES  □ NO  Requirements: Compliance with Health Canada’s Food and Drug Regulations

Please note: If the application is successful, the Award Agreement with CFI cannot be finalized until all documentation indicating that the above requirements are met is received by Institutional Programs.

The following signatures are required

Project Leader ________________ Date ________________

Department Head ________________ Date ________________

Dean ________________ Date ________________

Please indicate if a copy of the final application should be sent to:

□ Dean  □ Department Head  □ Other (Please indicate)