Please forward completed form with signatures and attachments to Research Services, 110 Gymnasium Place.

Principal Investigator: _________________________________ Phone: _________________________________

Department: _________________ College: _________________ Email: ___________________________

Funding Agency / Sponsor: _____________________________________________________________________

Project Title: ________________________________________________________________________________

Please complete the following checklist and attach all pertinent supporting documentation. Without ALL this information a Research Fund CANNOT be opened for these funds.

☐ If the application/proposal was NOT submitted to Research Services, please attach a description of the research to be performed along with the associated budget.

☐ Documentation from the sponsor MUST include answers to the following (eg: Award letter):

☐ What is the total funding amount?
☐ What are the start and end dates of the project (day/month/year)?
☐ If there are residual funds at the end of the project, are these funds to remain at the U of S or are they to be returned back to the sponsor?
☐ Does the sponsor require any financial reporting, if so what?
☐ Who is the contact person for the sponsor? Please provide the name, address, phone/e-mail.
☐ Does an invoice for the full amount need to be sent to sponsor at the beginning of this project?

☐ If applicable, please attach any other supporting documentation (eg invoice, cheque, et cetera).

Ethics – Animal Care – Biohazard Approval - A research account CANNOT be opened until appropriate protocol has been approved. Does this research require:

an Animal Care certificate? (circle) Yes / No Certificate number _________________
a Human Ethics certificate? (circle) Yes / No Certificate number _________________
a Biosafety certificate? (circle) Yes / No Certificate number _________________

The use of any Saskatoon Health Region (SHR) facilities? Yes / No

REQUIRED SIGNATURES:

Principal Investigator: _________________________________ Date: _________________________________

Department Head: _________________________________ Date: _________________________________

Dean: _________________________________ Date: _________________________________

If you have any questions, please contact the Research Services General Office at (306) 966-8576 and your call will be directed accordingly.

Revised February 2007