UNIVERSITY OF WATERLOO

Research Chair Appointment Form

First Name(s):	Initial(s):	Last Name:
Location: *(building)*	Employee ID:	New Appointment: ☐ Renewal: ☐

TYPE OF APPOINTMENT

Canada Research Chair ☐ Industrial Research Chair ☐ ☐ Other _____

TERM

Start Date:(MM/DD/YYYY)	End Date:(MM/DD/YYYY)

CHANGE IN LOAD

Teaching:	Research:	Service:

POSITION INFORMATION

Position Title:

SALARY DISTRIBUTION

Fixed percentage/Year

☐☐☐☐☐ - ☐☐☐☐☐ ☐☐☐
WORK ORDER ACTIVITY

$ _____
Annual Amount

Start Date: _____ End Date: _____ *Tier (CRC Only):* _____

☐☐☐☐☐ - ☐☐☐☐☐ ☐☐☐
WORK ORDER ACTIVITY

$ _____
Annual Amount

Start Date: _____ End Date: _____ *Tier (CRC Only):* _____

Remaining Balance

☐☐☐☐☐ - ☐☐☐☐☐ ☐☐☐
WORK ORDER ACTIVITY

$ _____
Annual Amount

Start Date: _____ End Date: _____ *Tier (CRC Only):* _____

STIPEND (if applicable)

☐☐☐☐☐ - ☐☐☐☐☐ ☐☐☐
WORK ORDER ACTIVITY

ORG UNIT

$ _____
Annual Amount

Start Date: _____ End Date: _____

☐☐☐☐☐ - ☐☐☐☐☐ ☐☐☐
WORK ORDER ACTIVITY

$ _____
Annual Amount

Start Date: _____ End Date: _____

If a work order beginning with 5 is being charged, a Research Financial Compliance & Eligibility Stamp is required.

Additional Comments:

APPROVALS

Chair:

Print Name _____ Signature _____ Date _____

Dean:

Print Name _____ Signature _____ Date _____

VP Academic & Provost:

Print Name _____ Signature _____ Date _____

Human Resources Use Only:	Signature:	Date Entered:

Distribution: Human Resources; Finance, Office of Research, Dean, Chair