YELLOW - Areas to be completed with examples included

**BLUE** - Instructions

Include all requested documentation with the cover sheet (list found at end of this document).

	SE	ARCH	RESEARCH	ACTIVI	TIES	100	
l. PR	OJECT	INFORMATION					
New	Projec	t 🔽 Ifa	an extension of a	n Existin	g Project, state Pro	ject #:	
Proje	ct Spo	nsor and if applicable,	Program name:	CIHR			
11.0					ing homes		
Title:	•	oroving exercise classe		nunity iii		neder of	
		(dd-mmm-yy <mark>): 29-12-2</mark>			End Date (dd-mmi	The second secon	
With	which	vestigator (PI)*AHS fac Department/School/ir Section 6 and include	stitute*/Centre*	do you n.	mes of students or want your research nesiology	postdoc go after t account associate	he PI's ed? *See additional
UW C	o-Inve	estigator(s) and Depart	tment of those w	ho have	agreed to participa	te (Attach addition	nal page if needed):
L.	*facı	ulty members only*	1		5.		
2.					6.		
3.					7.		
4,					8.		
Yes O	No V	complete Researcher. Is this an industry spo Conflict of interest (re	the entire projectebrate Animals are released. If a furnan Tissue/Flunor off campus) rolving human particular and or potential) ireal or potential) ireal or potential) ireal	et, include & Animal available iids, Obs ORE ce articipant offict of i tal?	Tissues (conducter, provide active AU ervational Recordin rtification is required.  If there is a real, interest Disclosure is any of the Investigation.	d on or off campus IPP#: ig and Secondary to d before funds are perceived or poten Form	). ORE certification is Data not in public
	٨	of Research.					
0	~	Controlled goods and information. See: Controlled Goods Program (CGP). Contact ResearchOffice@uwaterloo.ca.  Destricted information (o.g. page earl (health) information or information covered under an NDA). (See UST)					
0	4	Restricted information (e.g. personal (health) information or information covered under an NDA). [See IST regarding Policy 46].					
0	2	Consulting/Fee-for-Service payment to Investigator(s). [See Policy 17]					
0	ঝ	Any other known risk associated with this activity? (e.g. environmental impact) if yes, attach details.					
0	V	Biohazardous Agents. Contact Safety Office to obtain permit, where applicable.					
0	9	Radioactive Materials (including equipment containing radioisotopes). Contact Safety Office to obtain permit					
000	à	Field Work in Canada or abroad. Complete Field Work Risk Management form on Safety Office site, and					
0		secure approval from Chair / Director, Once approved, notify the Office of Research.  Teaching release, wif chair / director approves, get their initials here and provide supporting documents					
0	<del>२</del> २	Additional space, reso	ources, renovation	ns, upgra	ades, computer equ	ipment or constru	ction. Discuss with
-	V	Chair/Director.  If chair / director approves, get their initials here and provide supporting documents  Financial viability of project is dependent on any other source of funding. If yes, discuss financial risk with  Chair/Director.					

#### 3. COLLABORATIONS

Yes	No			
Q	0	If matching funds ar Describe:	e required, have they been or Industry partner	are you planning to leverage them elsewhere?
Q	0	If successful, will you List institution(s):	send any of the funds to ano Wilfrid Laurier University	ther institution?
Q	0	is this project led by Lead institution:	another Institution? University of Toronto	

# 4. TOTAL PROJECT BUDGET (If UW is not the lead institution, only include funds coming to UW)

Cash (excluding overhead)			d)	Overh	rhead on cash In-Kind		Total (cash + overhead + in-kind)	
Cash amount only		Overhead	amount only	In-kind amount only	Exact sum of 3 previous items			
Yes	No			ded the maximum overhead (Indirect costs) allowed by the sponsor? (In the case of industry ercentage overhead is 30% on Total Direct Costs) if not, please explain below or attach as necessary.  See standard overhead rates. For Tri-Agency grants, check yes and indicate				
<b>Ø</b>	0							
Spec	Special Overhead splits - provide details:				zero as the amou	unt of overhead.		

#### 5. WATERLOO SIGNATURES

I certify that the information above is accurate and complete to the best of my knowledge. I confirm that:

- I understand and will abide by the terms and conditions of the agreement/sponsor guidelines;
- I understand all applications, contracts, and grant agreements must be signed off by the appropriate university authority, per <u>Procedures 1A</u> and <u>10</u>;
- I understand that environmental impact statements/assessments may be required by sponsor/government and it is
  my responsibility to comply with these requirements and obtain certifications;
- I understand that should there be a change in criteria in section 2 during the life of the activity, it is my responsibility to notify the Office of Research;
- I will follow applicable University policies: Policy 46 (Information Management); Policy 17 (Quotations and Tenders);
   Policy 33 (Ethical behaviour); Policy 69 (Conflict of Interest); and Policy 73 (Intellectual Property Rights);
- Per the <u>Deficit Resolution Procedure</u>, I will provide another account to cover any deficit arising from this project;
- If installation of major equipment or renovation of existing space is involved, approvals for the space have been secured in the Department / School / Faculty and that arrangements have been made to cover the installation and/or renovation and/or future operating costs; and
- By signing this document, the principal Investigator delegates signing authority to his/her Chair or Director for the account(s) associated with this activity.

	Print Name	Date	Signature	
	Waterloo Principal Investigator			
Fi	rst – PI printed name - AHS faculty members only	Date	PI signature	
	ATT I A CONTROL OF THE PARTY OF	h - t h - t / d	In d	

<sup>\*</sup>This coversheet will be shared with all co-applicants/their chairs/directors and deans

### 6. ACKNOWLEDGEMENT AND APPROVAL FROM ADMINISTRATION

Print Name		Date	Signature		
Department Chair/School Director Second – Department head or designat	te printed name*	Date	Department head or designate's signature*		
Faculty Dean					
Third - Dean or designate printed name		Date	Dean or designate's signature		
If Section 1 indicates this project is associated with a Centre/Institute, the Director's signature is also requi					
Centre/Institute Director	•		s who are the PI sign as the as chair / director or dean.		

OFFICE OF RESEARCH SIGNING AUTHORITY

The University v agreement/sp Office of Res

# 5 business days prior to the deadline

# Submit cover sheets and supporting information (below) to your department administrator:

- 1. Short description of the project /research agreement, contract, or award (drafts are acceptable)
- 2. Short explanation of your role as researcher
  - 3. Clear budget that matches the cover sheet (drafts are acceptable if no substantive changes are anticipated)
  - 4. Supporting emails, memos or letters with details of the requests and decisions on:
    - o teaching release requests (section 2)
    - o additional space, equipment or renovations (section 2)
    - o cash /in-kind commitments from your academic unit, AHS, UWaterloo or sponsors (section 4)
    - o rare exceptions to the UWaterloo standard overhead rate (section 4)

October 2016