WATERLOO | COVER SHEET FOR SPONSORED RESEARCH

RESEARCH ACTIVITIES

1. PROJECT INFORMATION

New Project	If an extension of an Existing Project, state Project #:		
Project Sponsor and if applicable, Program name:			
Title:			
Start Date (dd-mmm-yy):		End Date (dd-mmm-yy):	
Principal Investigator (PI):			

With which Department/School/Institute*/Centre* do you want your research account associated? *See additional signature in Section 6 and include Org Unit if known.

UW Co-Investigator(s) and Department of those who have agreed to participate (Attach additional page if needed):		
1.	5.	
2.	6.	
3.	7.	
4.	8.	

Keywords (minimum 3):

2. CERTIFICATIONS AND RISK DECLARATION: Indicate which of the following apply to the proposed activity.

Yes	No	This section applies to the entire project, including Co-Is
		Live, Non-Human Vertebrate Animals & Animal Tissues (conducted on or off campus). <u>ORE</u> certification is required before funds are released. If available, provide active AUPP#:
		Human Participants, Human Tissue/Fluids, Observational Recording and Secondary Data not in public domain (conducted on or off campus). <u>ORE</u> certification is required before funds are released. If available, provide active ORE#
		Conflict of interest involving human participants. If there is a real, perceived or potential conflict of interest complete <u>Researcher Declaration - Conflict of Interest Disclosure Form</u>
		Is this an industry sponsored clinical trial?
		Conflict of interest (real or potential) involving any of the Investigators or external organisations involved in this proposal [See <u>Policy 69</u>]. Obtain approval from Chair/Director per Policy. Once approved, notify <u>Office</u> <u>of Research</u> .
		Controlled goods and information. See: Controlled Goods Program (CGP). Contact ResearchOffice@uwaterloo.ca.
		Restricted information (e.g. personal (health) information or information covered under an NDA). [See <u>IST</u> regarding <u>Policy 46</u>].
		Consulting/Fee-for-Service payment to Investigator(s). [See Policy 17]
		Any other known risk associated with this activity? (e.g. environmental impact) If yes, attach details.
		Biohazardous Agents. Contact Safety Office to obtain permit, where applicable.
		Radioactive Materials (including equipment containing radioisotopes). Contact Safety Office to obtain permit.
		Field Work in Canada or abroad. <u>Complete Field Work Risk Management form</u> on Safety Office site, and secure approval from Chair/ Director. Once approved, notify the <u>Office of Research</u> .
		Teaching release, where applicable. Discuss with Chair/Director.
		Additional space, resources, renovations, upgrades, computer equipment or construction. Discuss with Chair/Director.
		Financial viability of project is dependent on any other source of funding. If yes, discuss financial risk with Chair/Director.

3. COLLABORATIONS

Yes	No			
		If matching funds are required, have they been or are you planning to leverage them elsewhere? Describe :		
		If successful, will you send any of the funds to another institution? List institution(s):		
		Is this project led by another institution? Lead institution:		

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

Cash (excluding overhead)			Overhead on cash	In-Kind	Total (cash + overhead + in-kind)
Yes	No Have you included the maximum overhead (indirect costs) allowed by the sponsor? (In the case of industry sponsors the percentage overhead is 30% on Total Direct Costs) If not, please explain below or attach additional page as necessary.				
Special Overhead splits – provide details:					

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: <u>Policy 46</u> (Information Management); <u>Policy 17</u> (Quotations and Tenders); <u>Policy 33</u> (Ethical behaviour); <u>Policy 69</u> (Conflict of Interest); and <u>Policy 73</u> (Intellectual Property Rights);
- Per the Deficit Resolution Procedure, 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					

*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					
Faculty Dean					
If Section 1 indicates this project is associated with a Centre/Institute, the Director's signature is also required					
Centre/Institute Director					

OFFICE OF RESEARCH SIGNING AUTHORITY

The University will administer the project in accordance with i) its guidelines and policies; ii) terms and conditions of the						
agreement/sponsor guidelines.						
Office of Research	Date	Signature				