



Office of Research  
[www.unbc.ca/research](http://www.unbc.ca/research)

Please submit to the Office of Research  
 at least 5 business days before grant deadline  
 THIS BOX FOR OFFICE USE ONLY

Application Type: Grant Contract Donation/Gift

Received Date:

Date entered into Banner:

This form must be used when submitting Research Grant or Contract applications.

S#:

Investigator Details	UNBC Investigator: Principal Co-Principal	UNBC Phone:	UNBC E-mail:
	UNBC Program/Department/School:		Faculty:
	UNBC Co-Investigator: <i>If more than one, separate page attached</i>	UNBC Phone:	UNBC E-mail:
	UNBC Program/Department/School:		Faculty:
	Non UNBC Investigator: Principal Co-Principal	Institution:	
	<i>If more than one, separate page attached</i>		

Project Details	Type of submission:	*If not a new application please reference your Fund # below	This application will be submitted to the funding agency:
	Project Title:		
	Keywords: (for search capability)		
	Location of Research:		
	Sponsor (Agency/Institution providing funds to UNBC):		
	Originating Sponsor (if different):		
	Sponsor Program Name (if applicable):		
	Project Start Date:	Project End Date:	Application Deadline:
	Does this project have an international component?	Intellectual Property (IP) Anticipated:	Is there an agreement on ownership of IP?
Yes No	Yes No	Yes No N/A	

<b>Budget Details</b>	UNBC Amount Requested: \$	Other Contributors, if applicable: <i>(List names and amounts)</i>			
	Total Amount Requested: \$	Separate page attached			
	Overhead Included? Yes          No	Overhead:                  %			
	If less than 25% please explain why:				
	<b>The applicant must ensure appropriate overhead is included in the requested budget.</b>				
	Request redirection of Overhead to:    NRESI                          CDI                          HRI				
	Principle Investigator Wages:    Yes                          No				
	Number of Students:    Undergrads:                          Masters:                          PhD:                          Post Doc:				
Number of:    Volunteers:                          Community Members:                          Research Assistants:                          Research Associates:					

<b>Ethics &amp; Safety Certification Review</b>	Animal Care and Use Application Required?	Yes	No	ACUC File # (if known):
	Human Ethics Application Required?	Yes	No	REB File # (if known):
	Ethics "In Principle" Required to release funds?	Yes	No	REB File # (if known):
	Biosafety Application Required?	Yes	No	
	Radiological Hazard Application Required?	Yes	No	
	Field Work Hazards Training Required?	Yes	No	

<b>Space</b>	Facilities Implications: <b><i>Please specify university facilities that this proposal requires beyond those that are currently available to you</i></b>
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<b>Consultation</b>	First Nations/Aboriginal/Indigenous Consultation Required?    Yes                  No
	Name of First Nations/Aboriginal/Indigenous group(s):

<i>If this application is successful, do you authorize the Office of Research to share your application with future researchers applying for funding to assist in the mentoring process?</i>	Yes	No
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<b>UNBC Investigator</b>	By signing below, I agree to abide by UNBC policies and procedures ( <a href="http://www.unbc.ca/policy/category/research.html">www.unbc.ca/policy/category/research.html</a> )		
	_____	_____	_____
	UNBC Investigator's Signature	Name (please print)	mmm-dd-yyyy

<b>Institutional comments and Signatures</b>	Program Chair's signature and comments:		
	_____	_____	_____
	Program Chair Signature	Name (please print)	mmm-dd-yyyy
	College Dean / NMP signature and comments:		
	_____	_____	_____
	College Dean / NMP Signature	Name (please print)	mmm-dd-yyyy
Vice President Research's signature and comments:			
_____	_____	_____	
Vice President Research Signature	Name (please print)	mmm-dd-yyyy	

<b>Project Officer</b>	Recommended for approval:    Yes                  No	
	Comments:	
	_____	
Project Officer's Signature	Name (please print)	mmm-dd-yyyy