

# Research Contract Authorization Form

## Office of Research Services (ORS)

File No:

(Check Only One) ☐ Open  
☐ Close, or ☐ Amend, Account Number

[illegible]

**1. Project Title:**

**2. Principal Investigator:** \_\_\_\_\_ **Agency Name:** \_\_\_\_\_

**Academic Unit:** \_\_\_\_\_

### 3. Project Authorizations & Request for New Account:

- A. 1.) The undersigned has read the accompanying proposal/contract and budget, agrees with and will adhere to their terms and conditions as well as the applicable policies of the University and has arranged with the Department and Faculty for provision of necessary University facilities and/or services.
- 2.) The undersigned herewith requests the opening of a restricted funds account for conduct of the project.

Date: \_\_\_\_\_ Principal Investigator Signature \_\_\_\_\_ Email \_\_\_\_\_

Other Account Signing Authorities:

|                            |           |       |
|----------------------------|-----------|-------|
| Co-Principal Investigator: | Signature | Email |
|----------------------------|-----------|-------|

Other: \_\_\_\_\_ Signature \_\_\_\_\_ Email \_\_\_\_\_

- B. 1.) The undersigned have read the accompanying proposal/contract and budget, approved the participation of the P.I. and approved the provision of University facilities and/or services.  
2.) The undersigned approve the request for an account with the above-noted signing authorities.

Date: \_\_\_\_\_ Chairperson of Academic Unit: \_\_\_\_\_

Date: \_\_\_\_\_ Dean of Faculty/Director: \_\_\_\_\_

#### 4. Contract Account Approvals:

Date: \_\_\_\_\_ Director/Associate Director, ORS

Date: \_\_\_\_\_ Manager (Finance & Admin) \_\_\_\_\_

(For UNBSJ Accounts)

Date: Research Funds, ORS

**5. Financial Services Office Only:**

[illegible]

**Account Number Issued:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

**Issued By:** \_\_\_\_\_

**GST Rebate**                  **ASAP**

Comptroller and Director of Financial Services Approval: \_\_\_\_\_

|           |      |
|-----------|------|
| Signature | Date |
|-----------|------|

Date Account Opened: \_\_\_\_\_ Date Account Amended: \_\_\_\_\_ Date Account Closed: \_\_\_\_\_

*Note: The Principal Investigator(s) on a research contract must hold an academic appointment at the University of New Brunswick. The names of all the principal investigators are to be listed above and submitted to ORS at the time the proposal is initiated. In the event that during the project a change is required in the list of principal investigators, a memorandum is to be sent by the principal investigator to both Financial Services and ORS indicating the name of the person being replaced.*



# Research Contract Authorization Form

Office of Research Services (ORS)

## RESEARCH CONTRACT BUDGET BREAKDOWN

I PRINCIPAL INVESTIGATOR FEES: P.I. Initial\_\_\_\_  
# of days/hours

\_\_\_\_\_ @ \$\_\_\_\_\_ per \_\_\_\_\_ = \$\_\_\_\_\_

II SALARIES AND STIPENDS

Position Title # of days/hours/months

A. \_\_\_\_\_ @ \$\_\_\_\_\_ per \_\_\_\_\_ = \$\_\_\_\_\_

B. \_\_\_\_\_ @ \$\_\_\_\_\_ per \_\_\_\_\_ = \$\_\_\_\_\_

C. \_\_\_\_\_ @ \$\_\_\_\_\_ per \_\_\_\_\_ = \$\_\_\_\_\_

Sub-total \$\_\_\_\_\_

Fringe Benefits includes \_\_\_\_\_ % on A  
(if applicable)

\_\_\_\_\_ % on B

\_\_\_\_\_ % on C

III OVERHEAD  
Salaries/Stipends \_\_\_\_\_ % on \$\_\_\_\_\_ = \$\_\_\_\_\_

P.I. Fees \_\_\_\_\_ % on \$\_\_\_\_\_ = \$\_\_\_\_\_

Sub-total \$\_\_\_\_\_

IV NON-SALARY  
Supplies (incl. taxes) \$\_\_\_\_\_

Equipment (incl. taxes) \$\_\_\_\_\_

Travel & Subsistence \$\_\_\_\_\_

Other (Specify: \_\_\_\_\_) \$\_\_\_\_\_

Sub-total \$\_\_\_\_\_

**TOTAL** \$\_\_\_\_\_

### For Financial Services Office Use Only:

| LOC | UNIT | OBJECT | FD | FU | Debit or (Credit) | Description |
|-----|------|--------|----|----|-------------------|-------------|
|     |      |        |    |    |                   |             |
|     |      |        |    |    |                   |             |
|     |      |        |    |    |                   |             |
|     |      |        |    |    |                   |             |