



**Office of Research Services**  
Research Grant Application Checklist  
(RIS Data Entry Form)

*For UNB Co-Applicants*

Principal Investigator: \_\_\_\_\_ Institution: \_\_\_\_\_

UNB Co-Applicant: \_\_\_\_\_

Department or Faculty: \_\_\_\_\_ Email: \_\_\_\_\_ Tel. \_\_\_\_\_

Campus:      **Fredericton**      **Saint John**

UNB Commitments (e.g., time, cash or in-kind contributions):

Funding Sponsor: \_\_\_\_\_  
*e.g. NSERC, SSHRC, CIHR*

Funding Program: \_\_\_\_\_  
*e.g. Discovery, Insight, Operating*

Competition Deadline: \_\_\_\_\_ (dd-mmm-yyyy)

Application title: \_\_\_\_\_

Clearances required:      Ethics      Animal Care      Biohazard      Radiation      None

Research theme keywords: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
UNB Co-Applicant      Date

\_\_\_\_\_  
Department Chair      Date

\_\_\_\_\_  
Dean or Director      Date