

ORS CHECKLIST

This form must be completed by all York researchers submitting applications as either principal investigators (or as lead on institutional applications) or co-applicants and by all York researchers entering into research contracts, sub-contracts, and agreements.

Applications are expected to be reviewed by your Faculty-based research officer prior to submission to ORS.

The Office of Research Services (ORS) has a 48 hour (two working days) institutional signature practice for all grant and contract applications (for complete information on submission timelines please see: [Signature Policy](#) .

For hard copy application submission, please check your preference of the following two options:

Return to PI to send to agency (or specify other _____) or ORS will send application to agency.

SECTION A

1. Name _____ Role Principal Investigator Co-applicant

2. Faculty _____ Department _____ Address _____

3. Telephone _____ E-mail _____

4. Project Title _____

5. Name(s) of all Co-applicants (indicate external PI if applicable) _____

6. Agency and Program _____

7. Deadline _____

8. By checking the “Yes” or “No” columns in the table below, please indicate whether or not your research involves:

	YES	NO
Human Participants: Research that is subject to review includes any research involving interaction with or use of data from human participants (primary and secondary data). For a definition of secondary data analysis, see Guidelines on Secondary Data Analysis [PDF] . For all relevant information on human research ethics review, see Research involving Human Participants		
Vertebrate Animals: Research involving Animals		
Cannabis: Cannabis Research Licence Application		
Biohazards (viruses, cells, microbes, recombinant DNA, lab animals, human/animal body fluids and/or their tissues): Research involving Biohazards		
Controlled Goods (e.g., firearms, ammunition, munitions, goods, and technologies that guide weapons systems, etc.): Research involving Controlled Goods		

9. Some grants allow for the inclusion of overhead (i.e., indirect costs, FFA, and others) and all contracts must include overhead in the budget ([Overhead Charges on Research Grants and Agreements](#)).

Have the appropriate overhead charges been included? Yes Ineligible No, please explain:

10. Are you requesting course release/buy-out? No Yes If yes, what percentage of the total cost is being paid by your Faculty? _____%. Please indicate how much course release/buy-out is requested and in which years:

11. Does your proposal commit the University to contributing resources above and beyond the regular operating infrastructure available to you? If no, skip to **SECTION C**. If yes, complete **SECTION B** below (specify dollar value if applicable) **or** attach a spreadsheet that lists all York commitments indicating the sources. Also attach written confirmation of each York commitment from the unit providing it.

SECTION B

CASH CONTRIBUTIONS									
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Source	Notes
Student salaries									
Admin support (e.g., secretarial, technical)									
Course release (enter if York is covering cost)									
Cash unrestricted									
Other (explain in Notes)									
Other (explain in Notes)									
Other (explain in Notes)									
Other (explain in Notes)									
Annual totals:									
IN-KIND CONTRIBUTIONS									
	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Source	Notes
Admin support (e.g., secretarial, technical, financial)									
York graduate fellowships									
Space (e.g., lab, office, studio)									
IT (e.g., software, hardware)									
Other (explain in Notes)									
Other (explain in Notes)									
Other (explain in Notes)									
Annual totals:									
Project totals:									

SECTION C

Please complete/obtain the signatures below.

By signing this checklist, I am confirming that I and my co-applicants (if any) have the time and capacity to carry out the research and that if funded the project will be carried out in compliance with sponsor guidelines and York University regulations and policies as identified on the following web page: [Policies, Procedures and Regulations](#).

I confirm that the contributions listed above as applicant funds are funds that I have the authority to commit.

Applicant's signature _____ Date _____

<p>This checklist must be signed by the Department Chair (or equivalent, if applicable) and Faculty Dean.</p> <p>By signing this checklist, I am confirming that I have read the application, that I approve the commitments, if any, from my Unit, and that the applicant has the necessary time and facilities to carry out the research.</p> <p>Chair's Signature _____</p> <p>Chair's Name _____</p> <p>Date _____</p> <p>Dean's Signature _____</p> <p>Dean's Name _____</p> <p>Date _____</p>	<p>If you are directing this application through a Research Centre or Institute, please indicate the full name of the Centre/Institute:</p> <p>Name of Centre/Institute: _____</p>
---	--