

## **Research Start-up Grant Funding Claim Form**

Claim forms from eligible new faculty members may be submitted at any time prior to the end of their first full semester in a tenure track position at the level of assistant professor or above. Prior to completing this form, please review the Research Start Up Grant Policy, Procedures and Expenditure Guidelines at https://www.sfu.ca/research/researcher-resources/funding-opportunities/start-funding

Name of Grant Recipient	Department
Date of SFU Appointment as Assistant Prof, Associate Prof or Professor	Recipient's e-mail address
Amount of grant Awarded (per letter of appointment)	Name of grant Awarded (FRG or NFSG)  (per letter of appointment)

The information on this form is collected under the general authority of the University Act (R.S.B.C. 1996, c.468) and according to the Guidelines and Terms of Reference of the Research Start—up Grants Fund. This information is directly related to and needed for the University's Research Start-up Grants program and will be used to determine eligibility, for administration of awards and to generate statistical reports from an electronic database.

Please note that a complete start up grant claim package must include the following:

- 1. Funding Claim Form this document duly completed (along with the project summary) and signed. This form must be returned to your Faculty Dean's Office for approval and submission to SFU's Research Services (ORS) for review of your application.
- 2. Does your project require any of the following:
  - □ Ethics Certificate
  - □ Biosafety Permit
  - ☐ Animal Care Protocol

If yes, please provide copies of any approvals or certificates with your application.

Visit the Research Services website at <a href="https://www.sfu.ca/research/researcher-resources">https://www.sfu.ca/research/researcher-resources</a> for more information.

You can send an email to <u>ors@sfu.ca</u> if you have additional questions.

I declare that the information contained above is accurate and complete to the best of my knowledge and that the funds are required to support my own research. I agree to abide by the conditions specified in the terms of reference of the research grant policy and to the SFU Research Policies

(http://www.sfu.ca/policies/gazette/research.html) concerning research involving human subjects, secondary data not publicly available, animals, biohazards, or a conflict of interest.



## **Research Start-up Grant Funding Claim Form**

Grant Recipient Signature:	Date:
Chair/Director Signature (if applicable):	Date:
Dean or delegate Signature:	Date:
For Office use only:	
Rank:	
□ Assistant Professor	
☐ Associate Professor	
Start date of appointment:	End date of grant:
Work Visa Required?	
□ <u>Yes</u>	
$\square$ No	
If Work Visa Required, Has work visa been received?	
$\Box$ Yes	
□ <u>No</u>	
OR	
If Work Visa Required, date of approved Visa:	

Page 2 of 2