

Miscellaneous Research Recovery Account Request Form

Submit this form along with the applicable Research Project Statement which shows the expense that has been incurred to ROADS: roadsadm@mcmaster.ca

For Office Use:

Date submitted to ROADS:

Proposal #:

Project #:

Investigator Name:

Department:

McMaster Employee ID:

Address:

Email:

Phone:

Funding Amount:

Account Start Date:

Account End Date:

(will be 2050 unless otherwise requested)

Terms and Conditions:

A miscellaneous cost recovery account will be established to hold revenue and expenses related to miscellaneous research recoveries unrelated to specifically-funded research projects.

The service provided by the Investigator and for which costs are being recovered must be research-related and meet the definition of research (refer to McMaster Research Accounts Policy located here: <https://secretariat.mcmaster.ca/app/uploads/Research-Accounts-Policy-2009.pdf>).

The cost recovery project will be used only for small, one-off services provided by the Investigator to support the research of colleagues either internal or external at other universities/hospitals, public or private organizations - there must be no reporting obligation to the other party, no ethics certification requirements, and no IP implications.

Repetitive services provided externally are normally handled through a Research Services Agreement administered through the MILO office with the inclusion of indirect costs. Investigators are required to abide by University policies and have an agreement for all research service activities. The cost recovery project will be monitored for repetitive activity. The purpose of a service agreement is to protect both parties by addressing the scope of work/deliverables to be performed, the transfer of material/data between investigators, address indemnification/warranty, ethics and ownership of intellectual property.

Clinical research service agreements involving clinical site activities (i.e. patient recruitment and intervention) are administered by the affiliated-hospital partner and must not flow through this research recovery project. Indirect costs are also applicable for clinical studies.

A faculty member's other specifically funded research projects must not be used to temporarily charge expenses to be recovered at a later date.

The cost recovery project will be closed once funding has been zeroed out; but may be reactivated later (if needed) with the submission of a new Cost Recovery Account Request form.

All expenditures on this cost recovery account must comply with University policies and procedures, and the terms and conditions as noted above. Eligible expenses are those allowed by University Guidelines unless there are specific Sponsor Guidelines. A direct link and benefit to the general content area of the Project Holder's research must clearly be demonstrated in order for the expense to be processed by the University.

Meaning of Signatures:

As grant and/or account holder and/or primary signing authority for this account (to be established in my name if/when funds are received), I confirm the declarations made previously herein and acknowledge and accept my responsibility:

- 1) to read, understand, and comply with all applicable sponsor policies, regulations, terms and conditions of award; and all University policies governing research accounts, including, but not limited to, budget control, travel, ethics, and overhead;
- 2) to authorize all expenditures to be charged against my accounts and/or delegate (see below) this authority at my discretion;
- 3) to inform persons delegated with signing authority on my research accounts of applicable sponsor and University requirements (as outlined in 1. above) and of their associated responsibility for compliance;
- 4) to obtain any additional approval signatures, prior to making financial commitments;
- 5) to authorize and ensure delegate(s) authorize only allowable expenses against my research accounts, which may involve consultation with the applicable Research Finance Office and/or the sponsor;
- 6) to review monthly account statements to identify discrepancies and/or problems and to take corrective action in consultation with the applicable Research Finance Office;
- 7) to reimburse to the applicable research account(s) any expenditures authorized by me or my delegates if disallowed by the sponsor;
- 8) to eliminate any unauthorized over expenditures in accordance with the Research Accounts Policy, located here: <https://secretariat.mcmaster.ca/app/uploads/Research-Accounts-Policy-2009.pdf>, which, if all other alternatives have been exhausted, requires personal responsibility; and
- 9) to ensure all certifications are in order and comply with McMaster University and Federal regulations covering the ethical and safe conduct of research.

Department Chair/Institute Director certifies that:

- the proposed budget is consistent with the objectives of the PI's academic department.

Account Holder:

Signature:

Name:

Date:

Department Chair:

Signature:

Name:

Date: