

Agreement for Conditional Release of Funds

This form should not be used if your protocol is pending approval or has received approval

Investigator:

Phone Number:

Email Address:

Please indicate which approval is required;

if both are applicable, an additional form must be used.

ROLA Proposal or Award ID:

Brief description of proposed research:

Reason for delay in obtaining approval

Anticipated Date of
protocol submission:

Anticipated or desired date
of protocol approval:

By filling out this form, I hereby confirm that:

The research referenced above requires the use of humans or animals; however, the research is not sufficiently developed to prepare a complete protocol submission.

Before any humans or animals are involved in my research, I will obtain approval for this research from either the Office of Research Ethics or the Animal Use Subcommittee, as appropriate. To maintain access to these research funds, I will forward the approval detail to RD&S at rwrecords@uwo.ca

Signature of Principal Investigator

Date

Release of funds recommended:

Research Development & Services

Date

SUBMIT TO: RD&S, SSB 5150 or rwrecords@uwo.ca