



University of Toronto Faculty Member Remuneration from Sponsored Research Project

(Principal Investigator/Co-Principal Investigator, Co-Investigator or Collaborator)

Please Note: This form is **not** required for standard salary recovery programs such as Canada Research Chairs, Canada Excellence Research Chairs or NSERC Industrial Research Chairs. Please contact the Research Services Office or Innovations and Partnerships Office to confirm when this form is required.

1. Principal Investigator:
2. Application Title:
3. Sponsor:
4. Anticipated Application Date:
5. Remuneration per Individual

- a. Please provide the name(s) of any University of Toronto Principal Investigator, Co-Principal Investigator, Co-Investigator, or Collaborator who will receive remuneration from the sponsor, along with the anticipated amount for each individual.

Note that all remuneration is subject to the applicable Standard Benefit Rate (SBR).

Remuneration is categorized as follows:

- **Type 1:** Salary recovery by the Faculty or Department.
- **Type 2:** Direct payment to the researcher as T2 income, over and above regular U of T salary.

Please also indicate the appropriate remuneration type for each individual listed below.

Investigator / Collaborator 1

Name

Faculty/Department

Total Anticipated Amount

(in CAD)

Nature of Remuneration: Type 1 ☐ Type 2 ☐

Investigator / Collaborator 2

Name

Faculty/Department

Total Anticipated Amount

(in CAD)

Nature of Remuneration: Type 1 ☐ Type 2 ☐

Investigator / Collaborator 3

Name

Faculty/Department

Total Anticipated Amount

(in CAD)

Nature of Remuneration: Type 1 ☐ Type 2 ☐

Investigator / Collaborator 4

Name

Faculty/Department

Total Anticipated Amount

(in CAD)

Nature of Remuneration: Type 1 ☐ Type 2 ☐

Investigator / Collaborator 5

Name

Faculty/Department

Total Anticipated Amount

(in CAD)

Nature of Remuneration: Type 1 ☐ Type 2 ☐

- b.** Please provide a short justification for remuneration over and above regular U of T salary (Type 2).

6. Signatures / Approvals

- a. **Principal Investigator / Co-Investigator / Collaborator** who holds a faculty appointment at UofT.

Name: _____ Unit: _____

Signature: _____ Date: _____

My signature indicates that I am requesting remuneration from the sponsor and have confirmed with the Division of the Vice President of Research and Innovation that it is an eligible request.

- b. The **Director / Chair** (Dean non-departmentalized Divisions) or **Vice-Principal Research** (at UTM/UTSC) of the recipient's unit of Primary appointment.

Name: _____ Unit: _____

Signature: _____ Date: _____

My signature indicates that I have read the University's [Statement on Faculty Member Remuneration from Funded Research Agreements](#) and I support the proposed payment to the faculty member in my academic unit.

- c. The **Dean** (departmentalized Divisions) or **Vice-Principal Research** (at UTM/UTSC) of the recipient's unit of Primary appointment.

Name: _____ Unit: _____

Signature: _____ Date: _____

My signature indicates that I have read the University's [Statement on Faculty Member Remuneration from Funded Research Agreements](#) and I support the proposed payment to the faculty member in my academic Division.

Note: Completed forms should be attached to the MRA application. If not attached at the point of original submission, please send a note informing the Funding Officer when the form has been attached.