



Please Select:

Requested Protocol/Permit/Registration Exemption(s):	
Animals	Human participants
Biosafety, radio-isotopes, X-ray, or lasers	High hazard chemicals

Partial Funding Release or Protocol / Permit / Registration Unlinking Request Form

Principal Investigator \_\_\_\_\_  
 Department \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Project title \_\_\_\_\_  
 Fund # \_\_\_\_\_ Sponsor (e.g., CIHR) \_\_\_\_\_  
 Total Amount of the Award \_\_\_\_\_ Funding Award Period from \_\_\_\_\_ to \_\_\_\_\_  
 RSO / IPO contact ("Authorized by" name on FReD) \_\_\_\_\_

Instructions:

- If you require the **release of a portion of your funding** associated with the funded research project prior to protocol/permit/registration approval, complete **Section A**.
- If you need to **unlink a protocol/permit/registration** from your funded research application because the nature of the project has changed such that a protocol/permit/registration is no longer required, OR if the link was made in error, complete **Section B**.

Section A: Partial Funding Release Request (Prior to Protocol/Permit/Registration Approval)

Provide details for work to be done that **does not** require an animal use protocol, human ethics protocol, biosafety permit, radioisotope permit, X-ray permit, laser permit, and/or high hazard chemical registration:

Description of activities:

[Empty text box for description of activities]

Partial release amount requested: [Empty text box]

Itemized Budget details for costs associated with the partial funding release requested:

[Empty text box for itemized budget details]

By signing below, I guarantee that the partial funding release will not be used to fund the performance of research activities that require an animal use protocol, human ethics protocol, biosafety permit, radioisotope permit, X-ray permit, laser permit, and/or high hazard chemical registration, and that I will submit the appropriate certification/registration document(s) and receive approval prior to engaging in any such research activities.

\_\_\_\_\_  
PI signature \*

\_\_\_\_\_  
Date



**Section B: Unlinking Protocol/Permit/Registration from a Research Funding Application**

Provide details for the change to the research funding application such that the work to be done **does not** require an animal use protocol, human ethics protocol, biosafety permit, radioisotope permit, X-ray permit, laser permit, and/or high hazard chemical registration.

**Note:** If during completion of your MRA, you linked the protocol/permit/registration to the application in error or you inadvertently indicated that a protocol/permit/registration was required but not yet applied for or under review, please indicate this below.

Description of activities:

By signing below, I guarantee that the research activities for which funds have been awarded will not be used to fund the performance of research activities that require an animal use protocol, human ethics protocol, biosafety permit, radioisotope permit, X-ray permit, laser permit, and/or high hazard chemical registration, and that if in the future the activities change for whatever reason such that a protocol and/or permit and/or registration is required, that I will submit the appropriate protocol/permit/registration document(s) and receive approval prior to engaging in any such research activities.

\_\_\_\_\_   
 PI signature \*

\_\_\_\_\_   
 Date

\* **Note:** This form is enabled for digital signatures via both **Digital ID** and **Fill & Sign**. It is **strongly recommended that you use a digital signature** rather than a handwritten signature to facilitate faster processing of your request.

Visit the Adobe Help Centre for help with using:

- Digital ID: [https://helpx.adobe.com/ca/acrobat/using/digital-ids.html#create\\_a\\_self\\_signed\\_digital\\_id](https://helpx.adobe.com/ca/acrobat/using/digital-ids.html#create_a_self_signed_digital_id)
- Fill & Sign: <https://helpx.adobe.com/acrobat/using/signing-pdfs.html>

**Please complete and submit this form via e-mail to the appropriate RSO/IPO contact to initiate the review**

*This section is for administrative purposes only*

RSO/IPO agrees to release the funding requested to facilitate the work described by the PI or to unlink the protocol/permit/registration from the research funding application, as outlined in this request.

RSO/IPO Director Approval: \_\_\_\_\_ Date: \_\_\_\_\_

ROCO agrees that the work described by the PI in this request does not require the protocol(s)/permit(s)/registration(s) selected:

*(sign as required)*

ROCO Animal Ethics Director Approval: \_\_\_\_\_ Date: \_\_\_\_\_

ROCO Human Ethics Director Approval: \_\_\_\_\_ Date: \_\_\_\_\_

ROCO Research Safety & Compliance Director Approval: \_\_\_\_\_ Date: \_\_\_\_\_