

Financial Services Restricted Funds

Research Fund-holder Agreement

	(researcher), acknowledge by this
Agreement, that I have read and agree to respond the Office of the Vice President, Finance	
inclusive.	, , , , ,
http://secretariat.concordi I agree to follow those policies and procedur research fund[s].	
I accept full responsibility for all expense charged to my research fund[s].	s that I have authorized to be
I agree to follow all regulations found in the agranting agency that sponsors me and/o agreement supporting my research activities. are allowable by the guidelines and/or the agree	r to abide by any contractual I will only authorize expenses that
I relieve the University of any financial responsible for non-allowable expenses that my signing dele	•
I agree to charge the appropriate expenses to no transfers are permitted unless an error has must be supported with a written explanation.	
If my fund(s) should be in a deficit position, applicable. I recognize that I am solely responds account and that my research activities may be presented an acceptable proposal to the Dean of	nsible for the deficit in my research affected until such time that I have
Researcher / Department	Date
Please sign and return to Restricted Funds,	rinanciai Services, S-GIVI-700-15

For questions regarding this document, please contact Financial Services at ext 4940