

|  |
| --- |
| **NSLHD Research Finance Checklist** |
| **REGIS Ref:** | **20XX/STEXXXXX** |
| **Study/Contract Short Title:** |  |
| **Study/Contract Full Title:** |  |
| **Study aims:** |  |
| **Funding Party(ies)** |  |
| **Principal Investigator(s)** |  |
| **Study Contact name and contact details:**  | **Likely to be the same person completing this form.** |
| **GL Account** | **460620** |
| **Cost Centre** | **XXXXXX** |
| **Contract Start Date/****Date of last signature** | **Please provide estimate** |
| **Contract End Date** | **Please provide ethics expiry date** |
| **Fund received** **in advance/in arrears** | **Advance/Arrears (please delete one)** |
| **Frequency of funding** | **Eg in advance annually/paid quarterly on number of patients recruited etc** |
| **Total amount of the contracts (Estimate)**  | **Please provide estimate** |
| **PER FY (IF MORE THAN 1 FY)** | **Please provide estimate on total amount of funds per FY**  |
| **Management Accountant/Business Manager sign-off****\*PLEASE NOTE THE RESEARCH OFFICE WILL OBTAIN THIS SIGNATURE.** | **This is Selina Armutcu except for Cancer Network & Palliative Care, which is managed by Arul Arulnathan.**  |

* NSLHD Finance requires the completion and submission of this checklist to the Research Office with all research governance applications for research that is funded.