



Western Research

WESTERN INNOVATION FUND AN INTERNALLY FUNDED INNOVATION COMPETITION WESTERN INTERNAL GRANTS COMPETITIONS

LETTER OF INTENT (LOI)

1. [A Report of Invention](#) (ROI) must have already been submitted to [WORLDiscoveries@](#).
2. A Research On-line Administration (ROLA) submission is not required at this stage. However, Dean and Chair signature approval is required on the Letter of Intent. Please note that hard copy or email submission requirements may vary by Faculty.
3. Email your completed LOI with all required signature approvals in PDF format to intgrant@uwo.ca. Please note that hard copy submissions are not required, but will also be accepted.

See Research Western website for deadlines at: http://www.uwo.ca/research/funding/internal/western_innovation_fund.html.

REQUIRE ASSISTANCE?

Internal Competitions are administered by Research Development & Services (RDS), Room 5150, Support Services Building. (T: 519-661-2111 ext 84500, E-mail: intgrant@uwo.ca).

INVESTIGATOR PROFILE AND SIGNATURE:

Principal Investigator: *I have read and agree to adhere to the policies as outlined in the Western Internal Grants and WIF Program Guidelines.*

Name:

Rank:

E-mail:

Telephone:

Department or School:

Faculty:

Building & room #:

Signature of Applicant:

CO-APPLICANT(S) OR COLLABORATOR(S) PROFILE AND SIGNATURE:

Co-Applicant(s) and Collaborator(s): *Please include CV's for all co-applicants and collaborators with your application submission. Co-applicants and collaborators are ineligible to receive funding from this internal grant.*

Name:

Name:

E-mail:

E-mail:

Telephone:

Telephone:

Rank:

Rank:

Department or School:

Department or School:

Faculty:

Faculty:

Building & room #:

Building & room #:

Signature of Co-Applicant/Collaborator:

Signature of Co-Applicant/Collaborator:

PARTNER(S) PROFILE AND SIGNATURE:

Partners may be organizations in the public, private or non-profit sectors. Individuals are not eligible as partners.

Partner(s):

Name:

Name:

Position:

Position:

E-mail:

E-mail:

Telephone:

Telephone:

Company:

Company:

Signature of Partner:

Signature of Partner:

Date:

Date:

CHAIR AND DEAN SIGNATURES:

Signature approval confirms support for this Letter of Intent and agreement that the terms and conditions as outlined in Western's policies and WIF Guidelines have been met.

CHAIR'S SIGNATURE:

Signature, Department Chair:

Date:

DEAN'S SIGNATURE:

Signature, Dean of Faculty:

Date:

LOI INFORMATION:

Project Title:

Date Applying:

Anticipated Funding Envelope Request: Up to \$25,000 OR Between \$25,000 & \$50,000

(please check one)

OR Between \$50,000 & \$100,000

REPORT OF INVENTION (ROI) / PATENT SEARCH

A report of invention is required in advance of the LOI stage. To complete this form, please visit: <http://www.worlddiscoveries.ca/bdo/our-process#>.

(Place an **X** in the box to the left of your selection)

Report of Invention			
<input type="checkbox"/>	Submitted to WORLDiscoveries®	<input type="checkbox"/>	Attached
Patent Search			
<input type="checkbox"/>	Submitted to WORLDiscoveries®	<input type="checkbox"/>	To be done

CERTIFICATION APPROVALS

All research proposals involving human or animal subjects or biohazardous materials must be approved by a Western ethics, animal-care, or biohazards review committee.

Indicate, with an **X** on the chart below in the column to the right of the required information, the current status of the approvals required for this proposal.

If approval has already been granted, please indicate the authorization number in the space provided.

STATUS								
HUMAN SUBJECTS ETHICS APPROVAL	No human subjects	<input type="checkbox"/>	Approval granted	<input type="checkbox"/>	Pending	<input type="checkbox"/>	To be sought	<input type="checkbox"/>
			Authorization #:					
ANIMAL SUBJECTS APPROVAL	No animal subjects	<input type="checkbox"/>	Approval granted	<input type="checkbox"/>	Pending	<input type="checkbox"/>	To be sought	<input type="checkbox"/>
			Authorization #:					
BIOHAZARDOUS MATERIALS CLEARANCE	No biohazardous materials	<input type="checkbox"/>	Approval granted	<input type="checkbox"/>	Pending	<input type="checkbox"/>	To be sought	<input type="checkbox"/>
			Authorization #:					

PROJECT INFORMATION

Please fill in the required information below the section boxes.

BRIEF DESCRIPTION OF THE PROJECT

Describe the project in 300 words or less and in language suitable for communication with the general public. If funding is awarded, this description may be used in reports, newsletters, or media releases. A brief statement of the objectives, method of investigation, and potential results should be included.

This same description may be used when filling out the WIF application form. **Please use the blank area below this box to describe your project.**