**APPROVAL FORM FOR A RESEARCH-RELATED CONTRACT SUBMITTED FOR SIGNATURE**

1. **PARTICULARS OF PERSON SUBMITTING THE CONTRACT**

|  |  |
| --- | --- |
| 1. Initiator |  |
| 2. Department |  |
| 3. Tel |  |

1. **DETAILS OF EXTERNAL PARTY**

*if more than one, provide main contact)*

|  |  |
| --- | --- |
| 1. Company |  |
| 2. Contact person |  |
| 3. Position |  |
| 4. Tel |  |
| 5. Fax |  |
| 6. E-mail |  |
| 7. Address |  |

1. **TITLE OF THE CONTRACT**

*Brief descriptive title that can be used to refer to the project/contract*

|  |
| --- |
|  |

1. **PURPOSE OF THE CONTRACT AND LIKELY OUTCOME**

*Highlight purpose (e.g. starting discussions, undertaking research, etc.) and likely outcome of the project/discussions*

|  |
| --- |
|  |

1. **IMPLICATIONS FOR YOUR FACULTY**

*State if there are any implications for the faculty e.g. monetary (bridging or co-funding required, facilities required, students, required, other resources, etc.*

|  |
| --- |
|  |

1. **DURATION OF CONTRACT:**

|  |  |
| --- | --- |
| Start |  |
| End |  |

1. **IS THIS CONTRACT A RENEWAL OF A PREVIOUS OR EXISTING CONTRACT?**

|  |  |
| --- | --- |
| 1. State YES or NO |  |
| 2. If YES, nature of changes made to previous contract |  |

1. **CONTRACT FINANCIAL CONSIDERATIONS**

|  |  |
| --- | --- |
| 1. Contract value |  |
| Including / Excluding VAT / VAT not applicable (delete as applicable) | |
| 2. Is co-funding required? State YES or NO |  |
| 3. Is bridging finance required? State YES or NO |  |
| 4. Is levy applicable? | Yes / No |
| 5. If answered no, motivate why: |  |

1. **EMPLOYMENT CONTRACTS AND PAYMENTS**

|  |  |  |
| --- | --- | --- |
| 1. Are any new employment contracts *(i.e. new staff members on contract)* going to be required as a result of this contract? State YES or NO | |  |
| If YES, provide details |  | |
| 2. Are any secondary contracts *(i.e. current permanent or long-term contract staff getting additional salary)* going to be required as a result of this contract? State YES or NO | |  |
| If YES, provide details |  | |

1. **APPROVAL SIGNATURES (e-mail approval also acceptable and can be attached)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Person** | **Signature** | **Date** | **Purpose of signature** | **Other comments** |
| Initiator / Project Leader |  |  | To confirm that all obligations can be met; that ethics clearance will be obtained if applicable |  |
| HOD/DOS/Director of entity |  |  | Department/School notes contract and is satisfied obligations can be met |  |
| Executive Dean |  |  | Faculty notes contract and is satisfied obligations can be met |  |
| Contracts Lawyer for Innovation Office |  |  | To confirm Innovation Office legal review |  |
| Acting Director: Innovation |  |  | Innovation Office approval |  |
| Finance |  |  | Confirms financial aspects of contract |  |
| DVC: R&E |  |  | Final approval signatory |  |
| Director: Legal Services |  |  | Legal compliance checked if required |  |
| VC |  |  | Final sign off if >R10 million |  |