

University of Guelph Research-related International Memorandum of Understanding (MOU) Proposal Form

This form is to be used in the event a faculty member (U of G Academic Leader) wishes to propose the University of Guelph enter into an International MOU, for research or research-related purposes, with another entity (foreign academic institution, government organization, non-governmental organization, etc.) in order to make a statement of goodwill demonstrating strong interest to form a relationship with the foreign entity to generate reciprocal benefits.

This form is not to be used if the foreign entity is providing research funding (research applications, proposals, grants, contracts, project-specific requests for funding, research agreements, etc.), or if the University of Guelph will commit resources of any kind.

This form is for internal evaluation and record-keeping purposes and need not be lengthy or formal.

University of Guelph

U of G Academic Leader	
Department/College	

Foreign Academic Institution

Country	
Foreign Academic Institution Name	
Foreign Academic Institution Leader	Name: Title: E-mail: Phone:
Department/College	
Administrative Contact (for the purposes of negotiating the MOU)	Name: Title: E-mail: Phone:

Brief profile of the Foreign Academic Institution:

(Include a description of its particular strengths and how they complement University of Guelph strengths/research)

Collaborative activities in the past and/or underway:

(Include a description of any previously-signed International MOUs, or delegations which have visited University of Guelph – if applicable)

Purpose for proposing this MOU and description of proposed research activities:

Participating University of Guelph faculty members:

Participating Foreign Academic Institution faculty members:

Other units which would benefit or be affected by the MOU (in addition to the U of G Academic Leader's unit):

Potential sources of funding:

(In addition to any external sources of funding, describe any start-up funding requested from the University of Guelph, and what amounts/contributions departments/schools and/or colleges will make in support of the activities proposed in the MOU. Include support letters confirming these commitments.)

Short and long term benefits (and risks, if any):

Relationship management/stewardship:

(Include a description of how relationship with Foreign Academic Institution will be maintained throughout term of proposed International MOU)

Draft International MOU attached **Yes**
 No

SIGNATURES: This Proposal Form must be signed by the Principal Investigator (University of Guelph Academic Leader), the Department Chair (if applicable), and the Dean (or ADR) of the College. An email explicitly stating approval of the proposal in lieu of a signature is acceptable.

Once completed and signed, the Proposal Form should be returned to Abeir El Arqusosi, Office of the Vice-President Research, University Centre, 4th Floor, Room 417B, 519-824-4120 ext. 53081 via e-mail at a.arqusosi@exec.uoguelph.ca.

Name of Signing Representative	Signature	Date
_____ Principal Investigator – University of Guelph Academic Leader	_____	_____
_____ Department Chair (<i>if applicable</i>)	_____	_____
_____ Dean or Associate Dean (Research)	_____	_____

(If additional units will benefit or be affected by the MOU as described above, attach additional signatures from additional Principal Investigators, Department Chairs and Deans/Associate Deans (Research) – see next page.)

Institutional Approval “In Principle”	Signature	Date
_____ Vice-President (Research)	_____	_____
_____ Provost & Vice-President (Academic)	_____	_____
_____ Vice-President (External)	_____	_____

Additional signatures (if applicable)

Name of Signing Representative

Signature

Date

Principal Investigator

Department Chair *(if applicable)*

Dean or Associate Dean (Research)

Principal Investigator

Department Chair *(if applicable)*

Dean or Associate Dean (Research)

Principal Investigator

Department Chair *(if applicable)*

Dean or Associate Dean (Research)