

Authorization for Transfer of Research Funded Assets

Principal Investigator

Employee Number

Contact Information

Department

Current Asset Location

Proposed Asset Location

Descriptions of Asset(s) and Funding Agency

Value (\$)

Asset ID/Serial Number

Descriptions of Asset(s) and Funding Agency	Value (\$)	Asset ID/Serial Number

1. Has the transfer of the asset(s) been approved by the research agency that funded the asset(s)?

2. Has the Receiving Institution agreed to use the asset in accordance with agency guidelines?

3. Reason for the Transfer of the Research Funded Asset(s)

4. Notes or special instructions (Health and Safety, Insurance Requirements)

Principal Investigator _____

Signature _____ Date _____

I am aware of and approve the transfer of this research funded asset.

Associate Dean of Research _____

Signature _____ Date _____

I am aware of and approve the transfer of this research funded asset.

VP Research/Delegate _____

Signature _____ Date _____

1. Please attach a copy of the **LETTER OF AGREEMENT WITH THE RECIPIENT INSTITUTION** to this form and keep this form for your records.
2. Please provide a copy of this form to the Asset tracking administrator in Financial services: asset.tracking@queensu.ca.