UNIVERSITY OF GHANA

RESEARCH AND INNOVATION DIRECTORATE (RID)

RESEARCH SUPPORT REQUEST FORM

The University of Ghana requires that proposal submission and research grant agreements/contracts be routed through RID/College for review and institutional approval.
This form must be completed for each proposal submission and research grant agreement/contract before approval for institutional sign-off and submission to the Funder/ Sponsor.

No.	SUPPORT REQUESTED	PLEASE TICK AS APPROPRIATE
1	**Letter of Support/ Endorsement (Grant application/ proposal submission)** ***(Up to 5 working days for processing)*** Documents required: ☐ Completed grant application form and/or Draft proposal/ Concept note ☐ Budget ***(with 25% overheads incorporated)***/Documentation from funder confirming their prescribed overhead rate ☐ Call for Proposal/ Application document ☐ Draft/ sample letter *(if provided by funder/ donor)*	☐
2	**Letter of Support/ Endorsement (Capacity Building e.g. Training/Conference, etc)** ***(Up to 5 working days for processing)*** Documents required: ☐ Call for Proposals ☐ Budget ***(with 25% overheads incorporated)*** ☐ Application document/Draft Proposal/Concept note ☐ Draft letter *(if provided by funder/ donor)*	☐
3	**Signature of Authorized Institutional Representative for NEW research contracts, agreements, etc.** ***(Up to 10 working days for processing)*** Documents required: ☐ Approved proposal (i.e. proposal submitted and accepted by funder/donor) ☐ Approved budget ***(with 25% overheads incorporated)*** Documentation from funder confirming their prescribed overhead rate ☐ Electronic copy of contract/ agreement sent by email to the relevant Satellite Office	☐
4	**Signature of Authorized Institutional Representative for ONGOING research contracts, agreements, amendments etc** ***(Up to 5 working days for processing)*** Documents required if applicable: ☐ Revised proposal/ Scope of Work ☐ Revised budget ☐ Electronic copy of contract/ agreement sent by email to the relevant Satellite Office.	☐
5	**Letter of Intent/ Head of Term Agreement** ***(Up to 5 working days for processing)*** Documents required: ☐ Call for Proposals ☐ Application document/Draft Proposal/Concept note ☐ Draft letter *(if provided by funder/ donor)*	☐
6	**Completion of Due Diligence Forms** ***(Up to 7 working days for processing)*** Documents required: ☐ Draft/ approved proposal ☐ Draft/ approved budget *(if available)* ☐ Electronic copy of documents sent via email to the relevant Satellite Office.	☐

PROCEDURE FOR REQUESTING SUPPORT FOR ANY OF THE ABOVE:

1. Complete and submit this form with the relevant supporting documents for endorsement by your Head of Department.

2. Submit the endorsed research support request form with all supporting documents to the appropriate underlisted office for review and action:

Constituent Unit	EMAIL	IP Number(s)
▪ Research and Innovation Directorate	rid-grantsmgt@ug.edu.gh	1027/2724/2722
▪ College of Basic and Applied Sciences	cbas-grantsmgt@ug.edu.gh	
▪ College of Humanities ▪	coh-grantsmgt@ug.edu.gh	
▪ College of Education	coe-grantsmgt@ug.edu.gh	
▪ College of Health Sciences	chs-grantsmgt@ug.edu.gh	

APPLICANT DETAILS:

NAME:	
DEPARTMENT:	GRADE *(I.E., LECTURER, RESEARCH FELLOW ETC):*
EMAIL ADDRESS(ES):	CELL PHONE NO:
TITLE OF PROPOSAL ***(PLEASE ATTACH COPY OF PROPOSAL/ CONCEPT)****:*	

FUNDER/ DONOR/ SPONSOR:
Provide link to the call:
WHERE DID YOU FIND THIS OPPORTUNITY?: ☐ Research Professional ☐ Funders Website ☐ Mailing List ☐ Networks ☐ Other
DEADLINE FOR SUBMISSION OF DOCUMENT(S) REQUIRED:
ADDRESS FOR LETTER OF SUPPORT/ ENDORSEMENT

SIGNATURE

SIGNATURE OF APPLICANT:	DATE:

ENDORSEMENT BY HEAD OF UNIT

I confirm that the School/ Institute/ Centre/ Department of……. is in full support of the project described in the attached proposal. We are confident that the focus of the research described in the attached proposal falls in line with the School/ Institute/ Centre/ Department's research priorities.

Please attach on a separate sheet, any additional comments that supports this request.

NAME OF HEAD OF UNIT:	
SIGNATURE AND DEPARTMENTAL STAMP:	DATE:

FOR OFFICIAL USE ONLY

THIS FORM AND ALL ORIGINAL COPIES OF THE RELEVANT SUPPORTING DOCUMENTS MUST NOW BE FORWARDED TO THE APPROPRIATE GRANTS MANAGEMENT OFFICE FOR FOLLOW-UP ACTION

DATE RECEIVED BY RID GRANTS MANAGEMENT OFFICE
NAME AND SIGNATURE OF RESEARCH DEVELOPMENT OFFICER CERTIFYING THAT THE DOCUMENT HAS BEEN CHECKED AND THAT ALL ORIGINAL SUPPORTING DOCUMENTS REQUIRED ARE ATTACHED:

Date of Receipt at RID:

Decision:

Action taken by:	Date: