

Case Western Reserve University/Cleveland VA Medical Research and Education Foundation

Form 3

Memorandum of Understanding

This form describes the total professional responsibilities mutually arranged between Case Western Reserve University (CWRU) and the Cleveland VA Medical Research and Education Foundation (CVAMREF). The combination of research, teaching, service, and clinical activities, as applicable, at both CWRU and the CVAMREF comprise 100% of the total professional activities of the individual named below. This form is to be utilized if a CWRU employee will be working on a CVAMREF or when a CVAMREF employee is working on a CWRU project.

Employee Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Primary Place of Employment: \_\_\_\_\_  
 Period of Appointment: \_\_\_\_\_

<b>CWRU Appointment</b>	
Title of Appointment:	
Percent of time to be spent on <b>teaching, administration, service, clinical activities:</b>	%
Percent of time to be spent on <b>research</b> (list specific grants below):	
_____	%
_____	%
_____	%
<b>Total CWRU Effort:</b>	<b>%</b>

<b>CVAMREF RESEARCH Appointment</b>	
Title of Appointment:	
Percent of time to be spent on <b>teaching, administration, service, clinical activities:</b>	%
Percent of time to be spent on <b>research</b> (list specific grants below):	
_____	%
_____	%
_____	%
<b>Total CVAMREF RESEARCH Effort:</b>	<b>%</b>

<b>Total Professional Effort:</b>	<b>%</b>
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Signatures:

\_\_\_\_\_  
Employee Named Above

\_\_\_\_\_  
Principal Investigator of Project

\_\_\_\_\_  
Department Chairperson

\_\_\_\_\_  
Director of Cleveland VA Medical Research and Education

\_\_\_\_\_  
CWRU Research Administration Office

\_\_\_\_\_  
VA Associate Chief of Staff