

**NORTHERN MICHIGAN UNIVERSITY
ESTABLISHING RESEARCH ASSOCIATE APPOINTMENTS**

PURPOSE

The purpose of this policy is to establish a formal collaboration between a research partner and NMU for research or scholarship purposes. Such affiliations are approved by the Dean of Graduate Education and Research.

APPLICABILITY

This policy is applicable to NMU Offices and Departments wishing to establish research or scholarship collaborations with individuals who are at the time not employed by or otherwise affiliated with Northern Michigan University.

POLICY

Individuals not employed by NMU may be engaged in formal research or scholarship as part of an approved collaboration with NMU and will be recognized with the title of “Research Associate.”

Research Associates are designated as such solely for the purposes outlined in the objectives of the collaboration, and the University assumes no further obligations or liabilities in the relationship (the Research Associate will be required to sign an “Acknowledgement” to this effect). The collaboration and title of Research Associate are solely to provide the individual access to specific NMU resources necessary to aid the Research Associate in his/her collaborative research or scholarship project. Application for access to NMU resources is made through the collaborating/sponsoring NMU Office or Department, according to applicable University policies. The sponsoring Office or Department Head will assume overall responsibility for the collaboration; including monitoring and overseeing the Research Associate while the Research Associate is utilizing NMU resources or while the Research Associate is conducting research on NMU premises. The sponsoring Office or Department Head will annually submit a report to the Provost and Vice President for Academic Affairs regarding the collaboration.

REFERENCES

[NMU Safety Policy Statement](#)
[NMU Hazardous Materials Management Plan](#)
[NMU Hazardous Communication Plan](#)
[NMU Key Control Policy](#)
[NMU Computer Network Acceptable Use Policy](#)
[NMU Intellectual Property Policy](#)
[NMU Sexual Harassment Policy](#)

INITIATING DEPARTMENT

Graduate Studies and Research
401 Cohodas
graduate@nmu.edu
906-227-2300

ENABLING RESEARCH ASSOCIATE APPOINTMENTS

PROCEDURES

To be accorded Research Associate status, the following steps must be completed:

1. Offices or Departments seeking Research Associate status for a person with no current NMU affiliation must fill out the *Research Associate Appointment* request form, and have the Research Associate candidate sign and date the *Acknowledgment*.
2. The Office or Department Head must verify that the Research Associate is employed by an external entity (e.g. hospital, business, etc.), and must confirm with the Research Associate that the external entity (i.e. his/her employer) will at all times remain responsible for paying the Research Associate's wages, for making all federal and state mandated withholdings, for paying social security, unemployment, and worker's compensation taxes, etc. (See, attached "Acknowledgement" form). Immediately contact the Provost for instructions if the Research Associate is anything other than an employee of an external entity (i.e. is an "independent contractor," is not employed, etc.).
3. The desired privileges requested for the Research Associate must be clearly identified in the *Research Associate Appointment* request form. To receive these privileges the Research Associate must also complete any necessary attendant forms. The Research Associate must read all of the NMU Policy Statements identified on the *Research Associate Appointment* request form (listed under "References"), and must agree to abide by these Policy Statements. *Research Associate Appointment* request forms must be signed by the NMU sponsoring Office or Department Head and the Faculty/Staff Research partner (i.e. the

University Research Partner). The request is approved when signed by both the College Dean and the Dean of Graduate Studies and Research.

4. Upon approval, the individual receiving Research Associate status will be entered into an NMU data base. Information that will be included in the data base will include the name, mailing address, and contact phone number of the Research Associate.

**NORTHERN MICHIGAN UNIVERSITY
REQUEST
RESEARCH ASSOCIATE APPOINTMENT**

Research Associate Appointee Information:

Last Name: _____ First Name: _____ MI: _____

Previous Last Name(s): _____

Street Address: _____ City: _____ State: _____

Zip Code: _____ Phone Number: _____ Type: Mobile Home Work

Email Address: _____

External Affiliative Body (i.e. the Research Associate's employer): _____

NMU Research Partner (Must be Faculty/Staff):

Last Name: _____ First Name: _____

Position: _____ Department: _____

NMU Phone Number: _____

NMU E-mail Address: _____

Project Information:

Project Name: _____

Externally funded (include funding source): _____

Internally funded (include funding source): _____

Not funded: _____

Start Date of Project: _____

End Date of Project: _____

Start Date of Appointment: _____

End Date of Appointment: _____

Project Description:

Describe the collaboration's objectives:

Describe the NMU resources that will be made available to the Research Associate:

Privileges Requested for Research Associate (include rationale for each request)

_____ **Network Access** Start Date: _____ End Date: _____

Rationale:

_____ **NMU ID Card** Start Date: _____ End Date: _____

Rationale:

_____ **Internal Door Key** Building: _____ Room: _____

Start Date: _____ End Date: _____

Rationale:

_____ **Parking** Start Date: _____ End Date: _____

Rationale:

Required Signatures

Research Associate: By my signature below, I attest that I have read all of the NMU Policy Statements identified as “References” on the *Establishing Research Associate Appointment* form, and I agree to abide by the rules and regulations described in these Statements.

Research Associate Appointee: _____ Date: _____

NMU Research Partner: By my signature below, I attest that I have read all of the NMU Policy Statements identified as “References” on the *Establishing Research Associate Appointment* form, and I agree to abide by the rules and regulations described in these Statements.

University Research Partner: _____ Date: _____

Department Head and Deans: By my signature below, I agree to monitor and oversee the collaboration’s activities that take place using NMU’s resources and/or on NMU’s premises.

Department Head: _____ Date: _____

College Dean: _____ Date: _____

Dean of Graduate Studies and Research:

_____ Date: _____

**Research Associate Research Project
Safety and Security Plan**

Project Name: _____

Research Associate: _____

NMU Research Partner: _____

Known Risks (e.g., carcinogens, pathogens, explosive reagents, radioactive materials; and note that if any hazardous chemicals will be used, a Material Safety Data Sheet (MSDS) must be attached to this application):

Safety Plan (include chain of custody, disposal, safety training, safety notices):

Known Threats to Security (e.g., contaminate water supplies, spread of contagious disease, bomb)

Security Plan (secure storage, access control):

Start Date of Project: _____

End Date of Project: _____

ACKNOWLEDGMENT

I understand that by accepting Research Associate status at Northern Michigan University I am merely being given access to NMU resources (e.g. laboratory space, research facilities, computer systems, scholarships or other funding, etc.), to aid my participation in a collaborative research and/or scholarship project to which NMU is party. Except for such access, I otherwise recognize that I am entitled only to the same rights and protections as any other NMU visitor.

I hereby acknowledge that I am currently employed by _____ (hereafter “my employer”). Recognizing that NMU is not my employer, I acknowledge and understand that I will not be paid wages by NMU, and that my employer and I (not NMU) are responsible for all tax withholdings, social security, workers compensation, unemployment compensation, health insurance and other benefits (if applicable), etc. I recognize and acknowledge that if I become ill or am injured while engaged in the collaboration, while utilizing NMU’s resources, or while on NMU’s property, that Worker’s Compensation through my employer is my exclusive remedy.

I take full responsibility for my actions and/or behaviors while using NMU’s resources or while on NMU property. I understand that my “privileges” are limited to those identified in the *Research Associate Appointment* form, that I am entitled to utilize only those NMU resources identified in the *Research Associate Appointment* form, and that I will abide by the Policy Statements listed in the *Research Associate Appointment* request form. I specifically understand that NMU’s responsibility and/or liability for my actions and safety while on NMU property is no greater or different than NMU’s responsibility and/or liability to any other campus visitor.

I recognize and understand that NMU can discontinue my Research Associate status at any time and for any reason.

Date: _____

Research Associate Signature

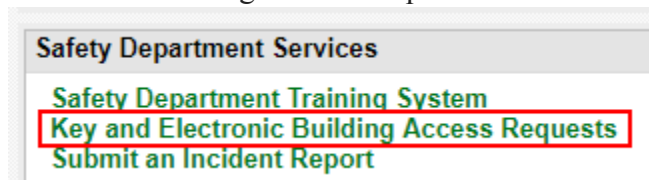
Procedure for Obtaining Research Associate Privileges

After approval of the Research Associate appointment, the following checklist is provided to assist in obtaining the approved privileges, including some or all of the following:

- Network Access
- NMU ID Card
- Internal Door Key(s)
- Parking

To receive each of these privileges, please do the following:

1. **Save your signed copy of the Research Associate Appointment form.** You will need this form to obtain each of the privileges noted above. A copy of this form will also be forwarded to the Dean and Department Head of the sponsoring department, and the Business Intelligence and Information Services department. Once you have an NMU Identification Number (IN) and profile created by Business Intelligence and Information Services, you are able to pursue the access privileges listed below.
2. **Network Access.** If authorized to receive Network Access, take the approved Research Associate Appointment form to the Help Desk (116 Harden Hall). The recipient of the form at the Help Desk will give you access to the NMU network.
3. **NMU ID Card.** If you are authorized to receive an NMU ID card, your sponsoring department must send an email to Carrie Rabitaille (csnowaer@nmu.edu) in Auxiliary Services. The email must contain your full name, NMU identification number, the department name, and the account number authorizing payment of \$15 for card production. This office will then provide an ID card.
4. **Internal Door Key(s).** If you are authorized to obtain internal door keys, fill out a Key and Electronic Building Access Request form which is available on MyNMU.



If approved, Public Safety will issue any *physical* keys. If your request to access an *electronic lock* is approved, you will need to visit the Wildcat Express Center (1227 University Center) to obtain an updated NMU ID at no additional charge.

5. **Parking.** If you are authorized to obtain a parking permit, contact NMU Police Department at 906-227-1476 or parking@nmu.edu to register your vehicle.