



Reporting organization name and address

Si vous désirez un questionnaire
 en français, veuillez cocher

Please correct any mistakes in name or address



INFORMATION FOR RESPONDENTS

Survey objective

This survey collects data which are essential to assure the availability of pertinent statistical information to monitor science and technology related activities in Canada and to support the development of science and technology policy. Your data will be used for instance, to provide indicators on the state of research and development (R&D) performed by private non-profit organizations and to complete national totals for scientific R&D expenditures and personnel.

Authority

This survey is conducted under the authority of the Statistics Act, Revised Statutes of Canada, 1985, Chapter S19.

Legal requirement

Organizations are required to provide this information.

Confidentiality

Statistics Canada is prohibited from publishing any statistics which would divulge information relating to any identifiable organization without the previous written consent of that organization. The data reported on this questionnaire will be treated in strict confidence, used for statistical purposes and published in aggregated form only.

Reporting period

This questionnaire should be completed for the **fiscal year ending in 2005**.

Federal-Provincial Agreement

In order to avoid duplication of enquiry, to reduce the cost of data collection and to provide consistent statistics, an agreement has been made with the Institut de la Statistique du Québec, under Section 11 of the Statistics Act, Statutes of Canada, where data on organizations located or having R&D activities in Québec will be transmitted to the Institut de la Statistique du Québec. The Statistics Act of Québec includes the same provisions for confidentiality and penalties for disclosure of information as the Canada Statistics Act.

In 2005, did this organization perform any R&D (as defined on the attached Instruction Guide)?

- Yes → go to question 1 No → In 2005 did your organization fund any R&D?
- Yes → go to question 1 and then to question 7
- No → please complete "Certification" on page 2 and return questionnaire

Please describe briefly your organization's main activities. If you have enclosed an annual report which contains this information, disregard this question.

1. ORGANIZATION'S FISCAL YEAR ENDING IN 2005 → FROM TO **2005**

Year Month Day Year Month Day

DATA ON R&D PERFORMED (questions 2 to 6)

2. EXPENDITURES FOR R&D PERFORMED WITHIN THIS ORGANIZATION IN 2005 IN CANADA (in thousands of dollars)

| Major fields of R&D | Current expenditures | Capital expenditures | Total |
|-----------------------------------|----------------------|----------------------|-------|
| Natural sciences and engineering: | | | |
| Medical | | | |
| Other | | | |
| Social sciences and humanities | | | |
| Total | | | |

3. SOURCES OF FUNDS FOR R&D PERFORMED WITHIN THIS ORGANIZATION IN 2005 (in thousands of dollars)

| | |
|---|--|
| a) Reporting organization (e.g. interests on own funds, investment income, membership dues, trust funds, payments from patients) | |
| b) Federal government | |
| c) Provincial governments (specify province) | |
| d) Canadian business enterprises (e.g. campaigns) | |
| e) Other Canadian private non-profit organizations | |
| f) Other Canadian sources (e.g. universities) (Please specify and attach additional sheet if necessary) (Please print full name) | |
| g) Foreign sources | |
| Total (equal to total of question 2) | |

4. IDENTIFY ALL ORGANIZATIONS PROVIDING MAJOR R&D FUNDS BY ATTACHING A LIST OF ORGANIZATIONS AND THEIR SUPPORT. YOUR ANNUAL REPORT MAY PROVIDE THIS INFORMATION.

5. AVERAGE PERSONNEL OF THIS ORGANIZATION ENGAGED IN R&D IN 2005

| Category | Full-time staff | | Part-time staff mainly engaged in R&D | Total |
|---|-----------------------|--------------------------|---------------------------------------|-------|
| | Mainly engaged in R&D | Engaged part-time in R&D | | |
| Scientists and engineers | Number | | | |
| Technicians and technologists: technically trained personnel who assist scientists and engineers in R&D; (e.g., chemical technicians, draftspersons). They may be certified by either provincial educational authorities or by provincial or national scientific or engineering associations | | | | |
| Other: personnel directly engaged in the R&D program (e.g., machinists and electricians engaged in construction of prototypes or staff engaged in the administration or clerical support of R&D units) | | | | |
| Total R&D personnel | | | | |

6. FIELDS OF MEDICAL R&D PERFORMED WITHIN THIS ORGANIZATION IN 2005
Please indicate the medical field in which R&D is performed within this organization.

| Fields of medical R&D | Yes | No | Fields of medical R&D | Yes | No |
|--------------------------|-----|----|--|-----|----|
| Cellular biology | | | Haematology | | |
| Genetics | | | Drugs and their effects | | |
| Immunology | | | Visual sciences (i.e. ophthalmology, optometry and other eye related research) | | |
| Endocrinology | | | Other medical fields (please specify, a) | | |
| Nutrition and metabolism | | | b) | | |
| Cancer | | | c) | | |

DATA ON PAYMENTS FOR R&D (questions 7 and 8)

7. PAYMENTS FOR R&D PERFORMED BY OTHER ORGANIZATIONS IN 2005 (in thousands of dollars)

| Major fields of R&D | Sector of performance | | | |
|----------------------------------|-----------------------|---|-------|-------|
| | Canadian universities | Other Canadian private non-profit organizations | Other | Total |
| Natural sciences and engineering | | | | |
| Medical | | | | |
| Other | | | | |
| Social sciences and humanities | | | | |
| Total | | | | |

8. ATTACH A LIST OF THE ORGANIZATIONS OR INDIVIDUALS TO WHICH MAJOR PAYMENTS WERE MADE FOR R&D (INCLUDE A DESCRIPTION OF THE PROJECTS IF POSSIBLE). YOUR ANNUAL REPORT MAY PROVIDE THIS INFORMATION.

COMMENTS: Reasons for Major Changes in Reported Expenditures and Personnel - In order to eliminate the necessity to verify discrepancies between this report and your last return (2004) please explain any significant changes which might be misconstrued as an error in reporting.

CERTIFICATION

| | | | | |
|---|---------------------|--------------|------------------------|-------------|
| Name of person who complete this report (please print): | Business address: | | | |
| Official position: | Date: | Postal code: | Telephone (area code): | Extension # |
| Internet address: | GST Number (BN No.) | | Fax: | |

THANK YOU FOR YOUR COOPERATION