****

**APPLICATION FOR RESEARCH/EVIDENCE-BASED PROJECT GRANT**

1. Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. Position \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. If student, program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Expected graduation date: \_\_\_\_\_\_\_\_\_\_\_\_\_
8. Educational Background:

 Institution/ Location Dates Degree Received

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. List professional organizations to which you belong, and any positions held:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

10. Attach a list of publications and/or papers presented at state, regional, or national meetings.

11. Amount requested (fill out project budget on page 2; limit is $1000) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

12. Have you previously applied for a Research/Evidence-Based Project Grant?

 If yes, was your project funded? \_\_\_\_\_\_\_\_ For what amount? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

13. This project is (check one)  Research  Evidence-Based

- Title of Project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

-. Anticipated (or actual) starting date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

-. Other Research/EBP Project Team members \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Each member wishing acknowledgement should complete a separate form.)*

-. Have you received funds from other sources for this project?

 If yes, where: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount received:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(***Required for students***): -Faculty advisor for project (name, title, and email):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has your advisor reviewed this application? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROJECT GRANT AGREEMENT:**

The information included in this application is correct to the best of my knowledge. If my proposal is funded by the Research and Evidence-Based Projects Funding Committee, I agree to use the grant for purposes described in the application and to return any excess funds to the chairperson of the committee. I agree to acknowledge Sigma Theta Tau for their support in all future presentations/publications regarding this project.

Upon completion of the project, I understand that I must submit a brief report which includes a summary of results and implications for nursing practice. If the project is not completed one year following acceptance of the award, I understand that I must submit an interim report of the study activities to the Research Committee Chair..

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return application to Rho Chapter Administrative Assistant, Mary DeBardeleben (marydp@med.umich.edu)

Direct any questions to Rho Chapter Research Chair:

Visit [https://nursing.umich.edu/rho-chapter](https://nursing.umich.edu/rho-chapter%20%20%20)  Click on “Officers & Committees”

**PROJECT BUDGET\*\***

**Budgets should be detailed and include expenses for conducting the project only. Travel and other non-project expenses should not be requested.**

|  |  |
| --- | --- |
| **ITEM** | **AMOUNT** |
| Materials & Supplies (list)(Example: 30 Health education booklets | 30 booklets X $5.00 each = $150 |
| Incentives to participants(Example: 30 amazon gift cards | 30 amazon gift cards X $10 each = $300 |
| Statistical consulting/Data processing & analysis(Example – transcription of qualitative data | $200 |
| Other (describe in detail) |  |
| **ITEM TOTAL** | **$** |

**\*\*GRANTS ARE AVAILABLE UP TO $1000**

**PROJECT PROPOSAL**

***Attach proposal, 5 pages maximum, including the following information:***

***Research project proposals***

* Specific Aims: state concisely and realistically what the project is intended to accomplish, and/or what research questions are to be addressed and/or what hypotheses are to be tested
* Background: briefly review the literature which substantiates the specific aims of the project
* Methods: describe the procedure to be used to accomplish the specific aims; include a description of and the rationale for special equipment and/or instruments to be used; if a survey questionnaire or interview is to be used, attach a copy of the instrument to the proposal
* Human or Animal Subjects: provide evidence of approval from the appropriate agency review committee for use of test subjects
* Significance: identify gaps which the project is intended to fill; make clear the nursing implications of the project; state the importance of the project by relating specific aims to longer-term objectives

***Evidence-based project proposals***

* Specific Aims and Significance: state what the project is intended to accomplish, what clinical questions are to be addressed and why they are important
* Evidence Synthesis: briefly summarize the current research evidence and describe how this evidence supports a specific practice change
* Implementation: describe the specific practice change, how it will be carried out, and how project outcomes will be evaluated. Include a timeline for implementation and copies of measurement tools to be used in evaluation.