To complete this form, please

open with Adobe Acrobat Reader in

a window outside your browser.

**CSRT Grant Application Form – SECTION ONE**

**Any information in Section One that could identify the PI or co-investigator names, institution, province, or gender will be blinded before being sent to the judges.**

[**Proposal**](http://www.camrt.ca/mrt-profession/professional-resources/research-support/) **Information**

|  |
| --- |
| Proposal Title |
|  |

|  |
| --- |
| Budget Statement |
| Total amount of funds requested, up to a maximum of $10,000 (note that an itemized budget with justification must appear in the Research Proposal): | $ |
| Is the success of this project dependant on receiving funds from a source other than the CSRT (applications will be considered for projects that have applied for or received funding from another source)?  | YES/NO |
| **If YES**, list funding received, approved and requested: |
| Source | Amount ($) | Date funding approved or anticipated decision date |
|  |  |  |
|  |  |  |
|  |  |  |

**Summary of Relevant Experience**

This section is intended to inform the judges about the PI’s skills and supports regarding team leadership/additional funding, etc., without identifying themselves. PIs are encouraged to outline any relevant education and training here (for example, *have you attended a research methods course?)*. Without identifying information, comment on relevant clinical, research or technical experiences and skills of each member of the research team (PI and Co-Is) and how they will contribute to the success of the proposal. *[Responses are limited to the space below; max 500 words]*

**Abstract**

Provide a non-technical abstract of the research proposal summarizing the research problem, the purpose, the scientific/methodological approach, anticipated/potential findings and the potential significance/impact of the research. It should be written in a non-scientific, non-expert language. *[Responses are limited to the space below; max 300 words]*

**Note: If this proposal is successful, this abstract may be reproduced in CSRT promotional materials.**

**Significance of the** [**Research**](http://www.camrt.ca/mrt-profession/professional-resources/research-support/)

Describe the significance of the proposed research, how it [aligns with the CSRT](https://www.csrt.com/about/)’s mission, vision and values, and/or strategic directions. If applicable, include its relevance to the respiratory therapy profession and potential impact on patient care. Please outline the knowledge translation plan here: how do you propose to disseminate your results to membership? Include a knowledge translation plan: how do you propose to disseminate your results to all end users, including CSRT membership and patients. *[Responses are limited to the space below; max 500 words]*

**Origins of the** [**Research**](http://www.camrt.ca/mrt-profession/professional-resources/research-support/)

Is this original research or an extension of an already existing research program?If it is part of a larger study, how do they relate? Describe your role in this study. *[Responses are limited to the space below; max 250 words]*

[**Ethical**](http://www.camrt.ca/mrt-profession/professional-resources/research-support/) **Considerations**

The PI is responsible for the ethical conduct of the study when data is collected from human subjects (e.g. patients, staff, students etc.). This includes complying with their institution’s research policies and procedures, obtaining Research Ethics Board (REB) approval, obtaining subject consent, and proper storage and disposal of data and/or personal health information.

If unsure whether REB approval or subject consent is required, the Research Grant Committee may be contacted prior to the application deadline (editor@csrt.com), or the Tri-Council Policy Statement ([Chapter 3 – The Consent Process](http://www.pre.ethics.gc.ca/pdf/eng/tcps2-2014/TCPS_2_FINAL_Web.pdf)) can be used as a guide.

**For the proposed study (check all that apply):**

□ REB approval is required and has been granted ***or,***

□ REB approval is required and will be acquired prior to data collection **or,**

□ REB approval is not required (explain why not in the space below)

□ Subjects will be consented (explain how in the space below) ***or,***

□ Subjects will not be consented (explain why not in the space below) **or,**

□ Subject consent is not required (explain why not in the space below)

In the space below, briefly describe the answers to the above statement(s) and describe any other ethical considerations relevant to this proposal. *[Responses are limited to the space below; max 300 words]*

[**Research**](http://www.camrt.ca/mrt-profession/professional-resources/research-support/) **Proposal**

This section describes the scientific project and proposed research activities, and should include the following (please note max wordcount for each section).

* Literature Review
* Purpose/Objectives
* Methods and Materials
* Proposed Data Analysis
* Timeline
* Budget
* References

Subheadings, figures and tables may be added as needed to improve organization, although the word count must be adhered to.

* + **Literature Review** *(max 600 words)* Describe the problem and its significance, the gap in knowledge. A hypothesis may be included here (if applicable)

**Purpose/Objectives** *(max 250 words)* A clear purpose should logically flow from the literature review

**Methods and Materials** *(max 1000 words)* Describe how the research is planned to be carried out in terms of study design, data collection methods and measures, sample selection, statistics considerations etc.

**Proposed Data Analysis** *(max 500 words)* Include a specific plan to analyze data, and draw conclusions from the data collected

**Timeline** *(max 300 words)*

**Budget** *(max 500 words)* Include justification of items that are not self-explanatory

**References** *(max 300 words)* Note that extensive referencing is not required or expected

**CSRT Grant Application Form – SECTION TWO**

**Attach a Curriculum Vitae (CV) for the PI listed below (see end of form).**

|  |
| --- |
| Principal Investor (PI) |
| Last name | First name | CSRT member No. |
|  |  |  |
| Department and Institution |
|  |
| Institution Address |
|  |
| Telephone | Fax | Email |
|  |  |  |

|  |
| --- |
| Co-Investigators (Co-I) (if applicable, attach additional pages if required) |
| Last name | First name |
|  |  |
| Department and Institution |
|  |
| Telephone | Fax | Email |
|  |  |  |
|  |
| Last name | First name |
|  |  |
| Department and Institution |
|  |
| Telephone | Fax | Email |
|  |  |  |
|  |
| Last name | First name |
|  |  |
| Department and Institution |
|  |
| Telephone | Fax | Email |
|  |  |  |

[**Declarations**](http://www.camrt.ca/mrt-profession/professional-resources/research-support/)

**Review and check each box** to confirm that the PI is aware of and agrees with the following conditions:

□ The PI is a current CSRT member in good standing for the duration of the funding

□ The PI’s manager and institution is aware of and supports this proposal

□ The research activities in this proposal comply with the research and ethics policies and procedures of institution and applicable documents (e.g., REB approval, patient consent etc.) as described in the Ethical Considerations section will be obtained prior to data being collected (if applicable)

□ The research team will endeavor to disseminate research findings through presentation and publication, the *CJRT* holds the right of first refusal on publication, and if the research is supported by other commercial/industry partners the PI must ensure such support does not prevent research dissemination

□ The CSRT will be acknowledged in all dissemination activities and/or products resulting from the work, as a source of project funding

□ The PI is responsible for submitting a final report following the funding period (approximately 1 year) to the Research Grant Committee consisting of an Executive Summary (to be published on the CSRT website with the PI retaining intellectual rights to work), summary of expenditures, and dissemination activities

I the PI, certify that I have read and comply with conditions found in the CSRT Research Grant Program’s Guidelines and Policies and that the information contained in this application is, to the best of my knowledge, true and complete. I understand that any misrepresentation or omission is cause to disqualify me for acceptance of this grant.

 PI signature (typed name constitutes a signature) Date

[**CV**](http://www.camrt.ca/mrt-profession/professional-resources/research-support/) **for the PI**

Please be sure to include any publications.

**Review and check each box** to confirm that the PI is aware of and agrees with the following conditions:

[**Submission**](http://www.camrt.ca/mrt-profession/professional-resources/research-support/) **Deadline**

A complete grant submission must be submitted electronically to editor@csrt.com by March 1 at 11:59pm.