

WeRPN Research Fellowship Grant Application Checklist

Applicants: Please use the following checklist to ensure you have included the relevant documents for your application.

Please note that all documents should be combined and submitted as one PDF document.

1. Completed application form below.
2. Project Description that includes:
 - a. Research Proposal (maximum 5 pages):
 - Title
 - Background (including expected outcomes and relevance to the profession of Registered Practical Nursing)
 - Research question and/or hypotheses
 - Method (detailed description of research method and how the research will be carried out including data generation (how will the data be obtained?) and data analysis (how will the data be analyzed?) and project timelines.
 - Ethical considerations
 - b. Quality of the team (maximum 2 pages)
 - c. List of references (optional) (maximum 2 pages)
3. Curriculum vitae for RPN Fellow (not included in page count)
4. Curriculum vitae for Researcher (not included in page count)
5. Letter of Support from co-contributing organization (not included in page count)
6. Supplemental materials as appropriate(optional) (maximum 3 pages)

RESEARCH FELLOWSHIP GRANT APPLICATION SUBMISSION DEADLINE:

July 15, 2021 - time stamped no later than 1700 hr.

Completed application in one pdf document is to be sent by email to aweeres@werpn.com

It is your responsibility to ensure that your application is complete upon submission. Incomplete applications will not be considered.

WeRPN RESEARCH FELLOWSHIP GRANT APPLICATION

TITLE OF PROJECT:	
I. REGISTERED PRACTICAL NURSE FELLOWSHIP CANDIDATE	
Name:	
Position:	
Institution:	
Address:	
Province:	Postal Code:
Telephone:	Email:
II. CO-INVESTIGATOR(S) (Add names as necessary)	
Name:	
Position:	
Institution:	Unit:
Telephone:	Email:
Name:	
Position:	
Institution:	Unit:
Telephone:	Email:
III. FUNDING Requested (max. \$12,500): \$	
IV. IN-KIND CONTRIBUTION (30% up to maximum of \$3750): \$	
VIII. OTHER FUNDING SOURCES	
Have you applied to other funding sources for this project? If so, please specify source, amount, and date by which a decision about funding will be known.	

IX. Is this proposal a pilot project for a larger study? If yes, identify the target funding agency for the next phase of the study

--

X. SIGNATURES

RPN FELLOW:	DATE:
(If applicable - Immediate Supervisor or Director) NAME:	TITLE:
SIGNATURE:	DATE:

Completed application is to be sent by email to: aweeres@werpn.com