

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 into the www.werpn.com research portal. The portal will be available May 15, 2022.

1. Completed application form below.
2. Project Description that includes:
 - a. Research Proposal (maximum 5 pages):
 - Title
 - Research question and/or hypotheses
 - Objectives for the Fellow (including expected outcomes and relevance of research problem/issue to the profession of Registered Practical Nursing)
 - Learning Plan and Method (detailed description of fellow's learning plan aligned with 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 ethical considerations
 - Project timelines and deliverables
 - b. Quality of the team, interaction with the executive sponsor, and benefit to the fellow (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 Academic researcher mentor (not included in page count)
5. Letter of Support from co-contributing organization and executive sponsor (not included in page count)
6. Supplemental materials as appropriate(optional) (maximum 3 pages)

RESEARCH FELLOWSHIP GRANT APPLICATION SUBMISSION DEADLINE:

May 31, 2022 - time stamped no later than 1700 hr.

Completed application in one pdf document must be submitted through the www.werpn.com research portal. The portal will be open and available on May 15, 2022.

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. EXECUTIVE SPONSOR	
Name:	
Position:	
Telephone:	Email:
III. CO-INVESTIGATOR (Academic Research Mentor)	
Name:	
Position:	
Institution:	Address:
Telephone:	Email:
III. FUNDING Requested (max. \$12,500.00): \$	
IV. IN-KIND CONTRIBUTION (30% up to maximum of \$3,750.00): \$	
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 study

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X. SIGNATURES

RPN FELLOW:	DATE:
EXECUTIVE SPONSOR NAME AND TITLE	DATE:
ACADEMIC RESEARCH MENTOR NAME AND AFFILIATION	DATE:

Completed application is to submitted through the www.werpn.com research portal available May 15, 2022.