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**Fall**

**Burgun Research Fund by the Sprague Foundation**

**Research Grant Application**

2023

**The Bergun Research Fund by the Sprague Foundation is administered through the Foundation for Health Environments Research (FHER).**

Please write your application to contain the sections outlined in this document. The Application Cover Sheet (section I), Budget (section V), Timeline (section VI), and Application Requirement Checklist (section X) can be extracted from this document as fillable forms. For additional details on the FHER grant and application, see the “FHER Grant Application Guidelines 2023”. Incomplete applications may be excluded from consideration.

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# APPLICATION COVER SHEET

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **APPLICANT INFORMATION** | | | | | | | | | |
| **PROJECT TITLE:** | | |  | | | | | | |
| **PRINCIPAL INVESTIGATOR:** | | |  | | | | | | |
| **CO-INVESTIGATOR(S):** | | |  | | | | | | |
| **PRIMARY CONTACT:** | | |  | | | | | | |
| **NAME OF INSTITUTION(S):** | | |  | | | | | | |
| **STREET ADDRESS:** | | |  | | | | | | |
| **CITY:** |  | | **STATE:** |  | **ZIP:** |  | | **COUNTRY:** |  |
| **TELEPHONE:** | |  | | | **EMAIL:** | |  | | |
| **WEBSITE (if applicable):** | | |  | | | | | | |

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| **FUNDING REQUEST INFORMATION** | | | |
|  | **Amount requested:** | **$** |  |
|  | **Committed match**  **(if applicable):** | **$** |  |
|  | **Tentative/anticipated match (if applicable):** | **$** |  |
|  | **Total research budget** | **$** |  |

# ABSTRACT

Please provide an abstract that provides an overview of your research proposal and contains the following sections. Maximum of 350 words.)

**Rationale**

**Research Question(s)**

**Method**

**Specific Aim(s)**

**Significance**

# RESEARCH PROPOSAL

Please provide a brief narrative outlining your proposed research that includes the following sections. Be sure to address the project’s anticipated outcomes and potential application to the practice of healthcare or the creation of healthcare environments. Add figures and tables as needed. Include formatted endnotes plus a bibliography. (Maximum of 2,500 words, excluding bibliography.)

1. **Background**
2. **Purpose**
3. **Research Methods**
4. **Expected Outcomes**
5. **Significance**
6. **Practical Implications**
7. **Dissemination Plan**

# RESEARCHER QUALIFICATIONS

Please provide a brief narrative for principal and co- investigators. List any potential conflicts of interest that may exist. If no conflict exists, please state that, ‘The investigator declares that there is no conflict of interest.’ (Maximum of 150 words per investigator).

Attach a resume of a maximum of two pages for each investigator.

**Name**

**Role**

**Researcher Qualifications**

# BUDGET

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| RESEARCH TITLE: |  | | | | | | | | |
| PRINCIPAL INVESTIGATOR: |  | | | | TELEPHONE: |  | | | |
| NAME OF INSTITUTION(S): |  | | | | EMAIL: |  | | | |
| PROJECT PERIOD: |  | | | | FAX: |  | | | |
| A. SALARIES AND FRINGE BENEFITS (calculate salaries by using either BILL RATE or % of FTE) | | | | | | | | | |
| FIRST AND LAST NAME | TITLE | TOTAL HOURS OR % FTE | RATE | TOTAL WAGES | TOTAL FRINGE | | FHER FUNDS | | OTHER FUND SOURCES |
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| **TOTAL** | | | | |  | |  | |  |
| B. CONTRACT SERVICES AND SUBCONTRACTORS (if applicable) | | | | | | | | | |
| ITEM | DESCRIPTION | | | | TOTAL COST | | | FHER FUNDS | OTHER FUNDS |
|  |  | | | |  | | |  |  |
|  |  | | | |  | | |  |  |
|  |  | | | |  | | |  |  |
| **TOTAL** | | | | |  | | |  |  |
| C. OTHER DIRECT EXPENSES | | | | | | | | | |
| TRAVEL EXPENSES | DESCRIPTION | | | | TOTAL COST | | | FHER FUNDS | OTHER FUNDS |
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| **TOTAL** | | | | |  | | |  |  |

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| D. EQUIPMENT AND SUPPLIES | | | | |
| ITEM | DESCRIPTION | TOTAL COST | FHER FUNDS | OTHER FUNDS |
|  |  |  |  |  |
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| **TOTAL** | |  |  |  |
| E. OTHER DIRECT PROJECT EXPENSES | | | | |
| ITEM | DESCRIPTION | TOTAL COST | FHER FUNDS | OTHER FUNDS |
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| **TOTAL** | |  |  |  |
| **TOTAL** | | | | |
| **TOTAL DIRECT COSTS = A + B + C + D + E** | |  |  |  |

# TIMELINE

Please provide a list of anticipated research process steps. Provide an estimate indicating which month you intend to begin each task and when you will complete the task. Most awardees have undertaken studies of about one year.

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|  | **ANTICIPATED TASK START AND FINISH (By Month)** | | | | | | | | | | | |
|  |
| **TASK** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** |
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# RESOURCES & ENVIRONMENT

## FACILITIES & OTHER RESOURCES

Identify the facilities to be used (e.g., clinical, computer, office, simulation lab, existing datasets). If appropriate, indicate their capacities, pertinent capabilities, relative proximity, and extent of availability to the project. Describe only those resources that are directly applicable to the proposed work. This information is used to assess organizational resources available to perform or support the effort proposed.

## OTHER SUPPORT

Provide any letters of support or institutional commitment for the research project. Describe any additional collaborators, consultants or training that will be a part of the research proposal and include supplementary documentation as needed. Note that it is especially helpful to provide documentation demonstrating access to any research sites and/or datasets.

# ETHICS

Designate if human subjects are involved, and if so, whether the proposed activities meet typical criteria for Institutional Review Board exemption. Applications that involve human subjects must include a ‘Protection of Human Subjects’ section that addresses the points noted below. Applications that are not proposing human subjects research but will use human data or biological specimens must provide a justification for the claim of no involvement of human subjects.

Requirements and Responsibilities. Research proposals that propose to involve human subjects must address:

1. the risk to subjects
2. the adequacy of protections against risk
3. potential benefits of the research to subjects and others
4. the importance of the knowledge to be gained
5. For clinical trials, data and safety monitoring plan and a data and safety monitoring board for Phase III trials

# BIBLIOGRAPHY

Please provide a bibliography in the format of your choice.

# APPLICATION REQUIREMENTS CHECKLIST

*(Please include the completed Application Requirements Checklist with application materials submission)*

|  |  |  |  |
| --- | --- | --- | --- |
| **X** | **APPLICATION SECTION** | | **COMMENTS** |
|  | **Application Cover Sheet** | |  |
|  | **Abstract** |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Research Proposal** | |  |
|  | Background |  |
|  | Purpose |  |
|  | Research Methods |  |
|  | Expected Outcomes |  |

|  |  |  |
| --- | --- | --- |
|  | **Researcher Qualifications** |  |
|  | **Budget** |  |
|  | **Timeline** |  |
|  | **Resources & Environment** |  |
|  | **Ethics** |  |
|  | **Bibliography** |  |

|  |  |  |
| --- | --- | --- |
|  | **Application Requirements Checklist** |  |