**GRANT APPLICATION FORM**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **GENERAL INFORMATION** | | | | | |
| Title of project: |  | | | | |
| New Project (cross mark): | Yes: | | No: | | |
| If no, follow up of ECU Grant no.: |  | | | | |
| Project duration (months): |  | | | | |
| Project period: | Start date: |  | | End date: |  |
| Total amount requested: | EUR | | | | |
| Total amount requested first 12 months: | EUR | | | | |
| Grant applied from others to finance the project: | Name: |  | | | |
| Amount: | EUR | | | |
| Grant received from others to finance the project: | Name: |  | | | |
| Amount: | EUR | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **PRINCIPAL INVESTIGATOR** | | | |
| Last name: |  | First name: |  |
| Application institution: |  | | |
| Title at institution: |  | | |
| University/DC degrees: |  | Institution: |  |
| Professional address: |  | | |
| E-mail: |  | | |
| Telephone: |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **OFFICIAL AUTHORISED TO SIGN FOR APPLICANT INSTITUTION** | | | |
| Last name: |  | First name: |  |
| Title at institution: |  | | |
| Professional address: |  | | |
| E-mail: |  | | |
| Telephone: |  | | |

|  |  |
| --- | --- |
| **PRINCIPAL INVESTIGATOR** | |
| *I agree to accept the responsibility of the scientific conduct of the project and to provide the required progress reports and final reports, as well as all publications resulting from this study if a grant is awarded as a result of this application.* | |
| Date: | Signature: |

|  |  |  |
| --- | --- | --- |
| **FOR ECCRE ADMINISTRATION USE ONLY:** | | |
| ECCRE Application no.: |  | |
| Date received: |  | |
| ECCRE review date: |  | |
| Granted: | Yes: | No: |
| Notification date: |  | |

**ATTACHED RESEARCH PROPOSAL**

**Documentation required**

Each item needs to be addressed. Please indicate when not applicable (N/A)

**Details of lead applicant and co-investigators:**

* Name
* Specialty
* Post held
* Contact details
* Employer

**Short Curriculum Vitae of lead applicant and co-investigators**

* Name, DOB
* Degrees, awarding body, class and date
* Present and previous positions held
* Recent relevant publications (3-4)
* Research Grants held in past 3 years

**Research summary**

* Summary includes full title of project and a structured abstract,

written for publication (maximum 200 words).

**Description in Layman’s terms (maximum 500 words)**

**Details of the proposed investigations (full description maximum 5 pages, font: Arial, pitch=12)**

* Title
* Full background
* Aim’s and objectives
* Design
* Main outcomes measures
* Methods
* Value of the research to patients
* Implementation and communication strategy?
* Communication strategy?
* Project milestones (use bar graph/gant chart, but restrict it to the execution of the project)
* References

**Finance and costs**

* Use and attach the Budget sheet downloaded from ECCRE.ORG
* Including comments for each Budget item

**Declarations**

* Signatures of all applicants and dates
* Signature of finance officers and declarations
* Whether hospital facilities, staff or patients will be involved and if so, authorization is needed by clinical director
* Cooperation agreements signed by relevant parties
* Whether ethical approval is required?
  + If not: why not?
  + If yes: which research ethics authority? And whether a related application has been submitted elsewhere and where?

**Appendices**

* Forms
* Questionnaires
* Documents to be used in the project