

## 2016 VCHRI Investigator Award Application Instructions

This guidance document outlines the required and optional components for the Award application. For each of the following components, you will need to submit a pdf document electronically.

1. UBC Research Project Information Form (required)
2. Statement of Understanding (required)
3. Research Module (required)
4. Research Proposal (required)
5. Canadian Common CV (required for applicant)
6. Mentoring Plan (Required for Mentored Clinician Scientist applicants only)
7. Letter of support from Mentor (Mentored Clinician Scientist applicants only)
8. Appendices (optional)
9. Nomination letter from academic (UBC) Department Head\* (required)
10. Nomination letter from your clinical (VCH) Department Head\* (required)
11. Letter of reference (required)

\*The nomination letter can be a joint clinical/academic Head letter as long as all required points are addressed

Scanned or electronic copies of the signatures and all documents are acceptable; do not submit the original documents.

### 1. UBC Research Project Information Form (required)

The UBC [Research Project Information Form](#) (RPIF) will need to be completed. The applicant is responsible for obtaining all the appropriate signatures before the application is submitted.

As this is a salary award, the applicant is responsible for obtaining the Academic Department Head and Faculty Dean's signature. Please contact your Department to determine the turnaround time to obtain your Academic Head's signature. To obtain the Faculty of Medicine Dean's signature, please contact Bryan Wong, Database Analyst & Grant Applications Officer ([bryan.wong@ubc.ca](mailto:bryan.wong@ubc.ca)). The Faculty of Medicine's Dean's office will require 3 business days for signatures.

### 2. Statement of Understanding (required)

This form is a statement of understanding that outlines the salary commitment from UBC and VCH Research Institute. The applicant's and the Academic Department Head's signature are required.

### 3. Research Module (required)

The Research Module consists of a 9 page form with text fields. For text fields, either type directly onto the form or cut and paste from another file. The character maximums (if listed) include spaces.

#### Signature pages

- Signatures are required by the applicant, Academic Department Head, Clinical Department Head, Faculty Dean and Office of Research Services.

**Note:** Signatures will not be provided immediately. Please ensure you allow time for your application to be reviewed by your Academic Department, Clinical Department, and your Faculty Dean office.

#### Description of Research Program

- This section only needs to be filled out by Clinician Scientist applicants.

## Lay Abstract

- Provide a brief lay abstract for your project, written in simple and clear language.
- Include a statement of how your project may impact the health of individuals and/or health care delivery at VCH.

**Note:** If your proposal is funded, this abstract may appear on the VCH Research Institute web site. Please do not include anything that might compromise future protection of intellectual property or patenting.

## Research Environment & Collaborations

- Describe the research space allocated for your research. List any equipment and facilities available, indicating whether these resources are dedicated or shared and the extent to which you have access.
- Indicate the colleagues/research programs you are affiliated with, and the nature of these collaborations. Clearly describe your role and contributions.
- You may add one additional page to this section.

## 4. Research Proposal (required)

Clearly describe a single research project that you plan to carry out during the tenure of this award. As this proposal is evaluated as part of the application, ensure that your proposal is rigorous and addresses key areas such as (but not necessarily limited to):

- rationale, what makes it significant
- current state of knowledge
- hypotheses/research question(s), objectives
- methodology (including analysis)
- expected outcomes and impacts (including direct impacts on healthcare, if applicable)

The research proposal must be a maximum of 5 pages, not including references, tables, or chart/figures.

## 5. Canadian Common CV (required for applicant and MCS mentor)

The applicant AND mentor must use the **Canadian Common CV Module** for this competition.

## 6. Mentoring Plan (required for Mentored Clinician Scientist applicants only)

The "Mentoring Plan" document must be completed, signed by both applicant and mentor, and attached to the research module.

## 7. Letter of support from Mentor (Mentored Clinician Scientist applicants only)

This letter of support from your mentor must outline:

- his/her full participation as your mentor
- his/her experience mentoring trainees/young faculty

## 8. Appendices (optional)

Appendices: which may only include data collection tools, participant consent forms, letters of support from collaborating departments or organizations, and ethics approval certificates (if already approved).

## 9. Nomination letter\* from your academic UBC Dept Head (required)

This letter must:

- confirm your academic appointment including rank and that you will have this appointment no later than July 1, 2015
- provide comments on your research performance and potential
- **MCS applicants:** confirm the commitment of \$20,000 in start-up funds
- **CS applicants:** outline the Department's research career plan for you, including after the award term is completed

## 10. Nomination letter\* from your clinical VCH Dept Head (required):

This letter must:

- confirm his/her support of your pursuit of research and the willingness to backfill/cover your clinical shifts as agreed
- provide comments on your research performance and potential

**Note for items 9 and 10:** \*The nomination letter can be a joint clinical/academic Head letter as long as all required points are addressed

**11. Letter of Reference (required):**

A letter of reference from someone knowledgeable about your research ability and experience, but not currently collaborating with you. It can be emailed from your referee's official institutional email address to [kerri.abramson@vch.ca](mailto:kerri.abramson@vch.ca) or mailed to address below.

**Contact Information**

Kerri Abramson, Vancouver Coastal Health Research Institute  
 Jim Pattison Pavilion North  
 #3665 – 910 West 10<sup>th</sup> Ave.  
 Vancouver, BC V5Z 1M9  
[kerri.abramson@vch.ca](mailto:kerri.abramson@vch.ca)      604-875-4111      local 67793

**Investigator Awards Application Checklist**

<b>Investigator Award Component</b>	<b>Required (✓) or Optional</b>
UBC Research Project Information Form	✓
Statement of Understanding	✓
Research Module	✓
Research Proposal	✓
Canadian Common CV	✓
Canadian Common CV for Mentor	✓ for MCS applicants
Mentoring Plan	✓ for MCS applicants
Letter of support from Mentor	✓ for MCS applicants
Appendices	Optional
Nomination letter from academic (UBC) Department Head*	✓
Nomination letter from your clinical (VCH) Department Head*	✓
Letter of reference - Emailed from referee's official institutional email address or submitted via mail	✓

\*can be a joint clinical/academic Head letter as long as all required points are addressed