

Innovation and Translational Research Awards Research Module

Principal Investigator (PI) Last Name	Principal Investigator (PI) First Name	
Email	Phone (work)	
VCH/PHC Clinical Department/Program	VCH/PHC Clinical Position	
Academic department & division	Academic Rank	
VCHRI or PHC research centre/program/area		
Work Mailing Address (include street, building, room	number, and postal code	
Project Title		
Location of Research Activity (building, site, and VC	H/PHC)	
Primary Contact: Name	Primary Contact: Email	

IN PARTNERSHIP WITH





SIGNATURE PAGES

Co-Investigators (up to six) Name (last name, first name) Name (last name, first name) Title Title Organization Organization Signature Signature Date Date Name (last name, first name) Name (last name, first name) Title Title Organization Organization Signature Signature Date Date **Principal Investigator Signature** Name (last name, first name) Signature Date

SIGNATURE PAGES

Co-Investigators (up to six)		
Name (last name, first name)		Name (last name, first name)
Title		Title
Organization		Organization
Cinn at wa		Cinn ature
Signature		Signature
Principal Investigator Signature		
Name (last name, first name)	Signature	Date

SIGNATURE PAGES

Academic Department Head		Clinical Department Head	
Name (last name, first name)		Name (last name, first name)	
Department		Department	
Signature	Date	Signature	Date

1. Summary of Research Proposal

Summarize the objectives and research plan. Provide a clear statement on how the proposed project is innovative and translational. Character count limitation: 2000

2. Research Project Team A) Describe the various roles and responsibilities of all team members (include all Co-Investigators), and your team's capacity to complete this two-year project. State the amount of protected research time for the PI, if applicable. Character count limitation: 2000
B) List the names of any collaborators, and how they will contribute to the research project. Character count limitation: 1000

3. Lay Abstract

Provide a lay (non-technical) summary of your project in simple and clear language suitable for lay audiences/press release. The summary must include a detailed statement of how your research will have an impact on patient care, and/or provide savings for the health system. Character count limitation: 2000

Note: if your proposal is funded, this abstract will appear on the VCHRI website and various VCH and VGH & UBC Hospital publications. Please do not include anything that might compromise future protection of intellectual property or patenting.

4. Indigenous Health Research

Explain the considerations of how your project may involve or impact Indigenous Peoples, communities, lands or partnerships. If you believe no considerations are applicable to the research, provide an explanation. Character count limitation: 2000

5. Project Budget

Applications will be considered for a maximum of \$100,000 for two-year projects. **Important Note:** Refer to Guidelines and Guidance Notes for budget criteria.

Item	Amount	In-kind contributions
Personnel		
Materials and Supplies		
Communications and publications		
Other (specify)		
Total value of in-kind contribution Total requested (maximum \$100,0		

6. Budget Justification

b. Budget Justification
A) Provide details and justification of requested funds listed in the budget on the previous page. Character count limitation: 2000.
B) Provide details on the budget requested in relation to your overall program of research and funding history (currently or pending). Character count limitation: 1800.