



## APPLICATION FORM

### 2022 ARC-NL Research Grant

#### Section A – Instructions and Submission Checklist

Full information for this funding opportunity can be found [here](#).

**Please save this form on your desktop first before opening in Adobe Reader or Acrobat. Fill in the form and save it in the following format: “Last Name\_ARC-NL RG2022”.** Completed application and other required documents should be saved as PDF files and sent to [arcnl@grenfell.mun.ca](mailto:arcnl@grenfell.mun.ca).

The deadline for submission of the full application is 5:00 pm NDT Tuesday, March 1, 2022. [NOTE: Letters of Intent are required by 11:59 p.m. Tuesday, January 4, 2022.] Documents received after that time will not be considered. You will receive a reply that your application has been received within 24 hours; if you do not receive this acknowledgment please contact [arcnl@grenfell.mun.ca](mailto:arcnl@grenfell.mun.ca) or the ARC-NL Coordinator at 709-639-4872.

Please use the checklist below to ensure you have included all required documentation for your application:

- Application Form**
- CV (Principal Applicant and all Co-Applicants)\***
- Research Proposal (2000 words maximum plus references and a maximum of 2 figures)\***
- Application to become an ARC-NL Research Member (Principal Applicant and all Co-Applicants; *if not already a member*)**
- Letter(s) of Support (*optional*)\***

**\*General Formatting for Attachments:** Type must be no more than six lines per inch, with a font size no smaller than 12 pts. Margins must be no less than ¼ inch (1.905 cm) all around. Files must be saved as PDF.

#### Is this research in the area of Social Sciences/Humanities/Population Health?

YES

NO

\* Please note: Biomedical/clinical research is also eligible.

#### Potential Co-funding Opportunities (*optional*)

Proposals may be considered for co-funding with an ARC-NL funding partner. Do you wish to be considered for co-funding if applicable to your application and do you consent to ARC-NL sharing your application materials with a potential co-funder?

Yes, I wish to be considered for potential co-funding where applicable and consent to having my application materials shared with a potential ARC-NL funding partner.

No, I do not wish to be considered for potential co-funding where applicable.

**If you have any questions about this application, please contact [arcnl@grenfell.mun.ca](mailto:arcnl@grenfell.mun.ca) or (709) 639-4872.**



## **Section B – Principal Applicant Information**

The Principal Applicant is the person who will take primary responsibility for the intellectual direction of the research and assume administrative responsibility for the funds. Principal Applicants holding an ARC-NL Research Grant cannot apply for another as a Principal Applicant until their current award is completed.

Principal Applicants must:

- Be employed by a post-secondary academic institution or by a health or community services institution in Newfoundland and Labrador and have dedicated time for research
- Have a Ph.D. or a health professional degree (or the terminal degree in their field)
- Be ARC-NL Research Members (click [here](#) for application form)

**Title:**

**Full Name:**

**Title and Position:**

**Institution:**

**Department:**

**Address:**

**Telephone:**

**Email address:**



## **Section C – Co-Applicant/Collaborator Information**

Please list all Co-Applicants/Collaborators below. 'Co-Applicant' (persons playing a substantial role in the project's design and execution) do not need a doctorate but they should be trainees or independent researchers with Master's qualifications in a field relevant to aging research. 'Collaborator' is an individual who makes a contribution to the intellectual direction of the research and who plays a role in its conduct.. Collaborators do not need to be affiliated with a Canadian postsecondary institution.

**1. Full Name:**

**Title and Position:**

**Institution:**

**Department:**

**2. Full Name:**

**Title and Position:**

**Institution:**

**Department:**

**3. Full Name:**

**Title and Position:**

**Institution:**

**Department:**

**4. Full Name:**

**Title and Position:**

**Institution:**

**Department:**

**5. Full Name:**

**Title and Position:**

**Institution:**

**Department:**



**Section D – Project Summary**

**Project Title:**

**Plain Language Title:**

**Plain Language Summary (300 words maximum).** Provide a summary of the proposed project in clear, non-technical language that can be understood by a general audience. Include objectives, research plan, originality and importance of work, and relevance to aging.



## Section E – Budget and Justification

**Excluded expenses include:** Expenditures considered as overhead, including space renovation or construction, purchase of laboratory furniture or other permanent equipment normally supplied by the institution; costs for entertainment or hospitality; academic fees for research trainees; salary payments to the Principal Applicant or any Co-Applicants; travel expenses for dissemination at scholarly meetings/ events greater than \$2,000 (Note: Travel to disseminate back to the community where data was collected is an eligible expense and not limited to \$2,000)

<u>Category</u>	<u>Amount (\$)</u>
Personnel (salaries + 15% benefits)	
Professional/Technical Services	
Dissemination	
<u>Equipment and Supplies</u>	
• Computer Equipment	
• Other non-disposable equipment	
• Supplies	
Travel ( <i>max. \$2000 for dissemination at scholarly meetings/events</i> )	

**Justification (provide a brief justification of the expenses listed above):**



**Section F – Research Clearance Certification Requirements:**

**Required**

**Not Required**

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=	-	°	<b>To Follow</b>
	<b>Animal Care</b>	°	<b>To Follow</b>
	<b>Biosafety/Biohazard</b>	°	<b>To Follow</b>

**N/A**

**N/A**

**N/A**



**Section G – Authorization Form**

The undersigned have read and agree to the terms of the ARC-NL Research Grant [guidelines](#).

*NOTE: Collaborators may sign in a co-applicant space below but do not need additional signatures.*

- 1. Principal Applicant Signature:** **Date:**  
Department Head Signature:  
(Dean, Grenfell): **Date:**  
Dean/VP Signature:  
(AVP Research, Grenfell): **Date:**
- 2. Co-Applicant Signature:** **Date:**  
Department Head Signature:  
(Dean, Grenfell): **Date:**  
Dean/VP Signature:  
(AVP Research, Grenfell): **Date:**
- 3. Co-Applicant Signature:** **Date:**  
Department Head Signature:  
(Dean, Grenfell): **Date:**  
Dean/VP Signature:  
(AVP Research, Grenfell): **Date:**
- 4. Co-Applicant Signature:** **Date:**  
Department Head Signature:  
(Dean, Grenfell): **Date:**  
Dean/VP Signature:  
(AVP Research, Grenfell): **Date:**
- 5. Co-Applicant Signature:** **Date:**  
Department Head Signature:  
(Dean, Grenfell): **Date:**  
Dean/VP Signature:  
(AVP Research, Grenfell): **Date:**