##### James Kreppner Award Program 2022 Application Form

###### Overview

Applicants are advised to review the feedback provided at Letter of Intent stage and the Canadian Blood Services’ James Kreppner Award Program Guidelines to ensure alignment of their application with the program objective, research priorities, and eligibility criteria.

The complete application package must be delivered to
Canadian Blood Services by 11:59 PM January 20 2023 (Pacific Time)

###### Instructions

It is the Applicant’s responsibility to ensure that all documents are delivered by the application deadline. **No applications or additional material will be accepted after this deadline. Late or incomplete applications will not be considered.**

Applicants must have completed a Letter of Intent and be invited by email to submit a James Kreppner Award application. Unsolicited applications will not be accepted.

All documents must be delivered **by email** to centreforinnovation@blood.ca.

The submitted Application Package must include the following documents:

1. **Completed Application Form:** Ensure that all fields are complete, including Applicant typed name and date in Section A - Agreement, before submitting the application. **Page/space and word count limitations must be adhered to**. Sections of the application that exceed the identified limits will not be considered.
2. **Supporting Documents:**
	1. **Project Team Member(s) CV:** A single PDF of a full Canadian Common CV (<https://ccv-cvc.ca/>) in the **CIHR Academic format or equivalent** for all identified project team members. See Section C for details.
	2. **Letter of Support:** If the project budget is to be used toward the salary of the Applicant, a letter of support is required from the Applicant’s academic institution that indicates the institution’s commitment to provide research and office facilities (as required) and to protect the applicant’s time. See Section D for details.

Additional supporting documents beyond those specified above will not be considered.

###### Section A: General Information

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| **PROJECT TITLE** |
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| **APPLICANT**  |
| Last Name: |  |
| First Name(s): |  |
| Preferred Name:(Optional) |  |
| Title: |  |
| Institution: |  |
| Phone: |  |
| Email: |  |
| **INSTITUTION** |
| Institution(s)/Organization(s) where research will be conducted: |  |
| Name of Institution(s) that will administer the funds (Institution Paid): |  |
| **AGREEMENT** |
| By typing my name and date below, I, the Applicant, acknowledge that the enclosed application for research funding from Canadian Blood Services represents a study for which the Applicant was responsible for the proposal development. If funded, the Applicant will assume primary responsibility for the implementation and performance of the proposed study.The Applicant agrees that the general conditions governing the James Kreppner Award Program, as set out in the Guidelines, are accepted by the Applicant on behalf of the project team and the institution. |
| First, Last Name |  |
| Date (YYYY-MM-DD) |  |

###### Section B: Project Proposal

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| PROJECT ABSTRACT |
| Provide a summary (200 words max.), in **lay terms**, of the proposed project, highlighting project objectives and deliverables and describing how the research is aligned with the Program’s objective, including identified priorities. If the project is funded, **this summary may be published on Canadian Blood Services’ website.** |
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| PROJECT PROPOSAL |
| **In four (4) pages maximum** (including tables and figures):1. Describe the background, rationale, and objectives of the project, including any relevant preliminary findings;
2. Outline the proposed research methodology, clearly demonstrating the integration of project members’ expertise towards achieving the goals of the project;
3. Describe the relevance of the proposal to the objectives and priorities of the Program; and
4. Detail the key deliverables anticipated by the end of the funding period.

A list of selected references may be included **in addition** to the four (4) page limit. |
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| TRANSLATIONAL PLAN |
| **In the space provided**, provide a brief and clear description of the short- and long-term translational plans for the proposed research, including how the proposed research will further the long-term goals. Identify the intended audience for the research, how the research results will be shared, and how the audience will use the research results. If relevant, identify any partners that will help in the application of the research results. In addition, indicate the tools and resources that will be developed to promote uptake of the research results. |
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| SEX AND GENDER-based analysis + (SGBA+) |
| Sex and gender-based analysis including other social determinants that may affect health (SGBA+) has the potential to make health research more rigorous, more reproducible, and more applicable to everyone. SGBA+ must be considered when developing the research proposal. Visit the [CIHR](http://www.cihr-irsc.gc.ca/e/32019.html) website for resources to help with incorporating sex, gender, and other social determinants that may affect health into research design. |
| Are sex (biological) considerations taken into account in this proposal? | [ ]  Yes [ ]  No |
| Are gender (socio-cultural) considerations taken into account in this proposal? | [ ]  Yes [ ]  No |
| Are other social determinants that may affect health (ethnicity, income, age, education, etc.) taken into account in this proposal?  | [ ]  Yes [ ]  No |
| Describe how sex, gender, and other determinants that may affect health will be considered in your research proposal. If they are not considered in your proposal, explain why not.  |
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| HEALTH AND SAFETY CERTIFICATION |
| Indicate if the proposal includes research involving human participants and if ethics approval has been applied for or obtained. Note that this information is used for administrative purposes to ensure that research ethics approval is in place prior to the release of funds and is not used to evaluate the merit of the application. |
| Human Experimentation |
| Has ethics approval been applied for or obtained? | [ ]  Yes [ ]  No [ ]  Not applicable |

###### Section C: Project Team

In the table below, list all proposed project team members that have been identified to work on the proposed project. In a separate file, provide a full Canadian Common CV (<https://ccv-cvc-ca/>) in the **CIHR Academic format or equivalent** for all identified project members, including trainees.

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| --- | --- | --- |
| **Name** | **Position and Institution** | **Email** |
| **1. Applicant:** |  |  |
| Role in project:  |
| **2.**  |  |  |
| Role in project:  |
| **3.**  |  |  |
| Role in project:  |

*Insert rows as needed.*

###### Section D: Budget

Outline the budget requested and provide justification that the requested resources are appropriate to financially support the research project as described in the application. Review the ‘Use of Funds’ in the program Guidelines to become familiar with the eligible and non-eligible expenses under this program.

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| **BUDGET OVERVIEW** |
| **Research staff (excluding trainees)** |

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| --- | --- | --- | --- | --- |
|  | No. | Salary | Benefits | Funds Requested |
| Research assistant(s) |  |  |  |  |
| Technician(s) |  |  |  |  |
| Other personnel |  |  |  |  |
| **Research trainees** |
|  | No. | Stipend | Benefits | Funds Requested |
| Postdoctoral fellow(s) |  |  |  |  |
| Graduate student(s) |  |  |  |  |
| Summer student(s) |  |  |  |  |
| **Materials, Supplies, and Service** |
|  | Funds Requested |
| Materials and supplies |  |
| Services |  |
| Equipment (maximum $8500) |  |
| Travel  |  |
| Meeting costs |  |
| Publication costs |  |
| Other |  |
| **TOTAL** |  |

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| **BUDGET DETAILS** |
| **In seven (7) pages maximum**, provide a detailed justification for all budget items requested. In kind contributions to project must be identified. **If the funds are to be used towards the salary of the Applicant, a letter of support must be provided by the institution that indicates the institution’s commitment to provide research and office facilities (as required) and to protect the applicant’s time.** |
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| **REAL OR PERCEIVED BUDGETARY OVERLAP**  |
| **In the space provided below**, supply details of any overlap with existing or proposed funding. Use this space to dispel any uncertainties that could arise in the minds of reviewers as to whether you are already funded, in whole or in part, for the proposed work. |
| Source: |  |
| Amount: |  |
| Comment as to overlap/lack of overlap: |  |
| Source: |  |
| Amount: |  |
| Comment as to overlap/lack of overlap: |  |

*Insert rows as needed.*