

Grant Application Process

Sigma Theta Tau

Theta Epsilon Chapter

University of Central Florida

Four grants will be awarded for \$500 each at the Fall Program November 2009.

Application is available on the UCF College of Nursing Website at <http://www.nursing.ucf.edu/stt/>

Submit Completed application, vitae and proposal along with a letter of support from a faculty member to Linda Speranza:
LSperanza@valenciac.edu

Deadline for submission is September 30, 2009.

Questions can be directed to Linda Speranza at the above email or to Jayne Willis, President at Jayne.willis@orlandohealth.com

**Sigma Theta Tau International
Chapter Research Grant
Agreement Form**

If my proposal is approved for funding, I agree to:

1. Accept responsibility for the scientific conduct of this study.
2. Expend the funds as described in the proposal, and return unused funds to the treasurer of the Theta Epsilon chapter.
3. Submit a progress report (semi-annually) until the study is complete.
4. Send a written final copy of the research and one abstract to the secretary of the chapter.
5. Acknowledge the grant support of Theta Epsilon Chapter of Sigma Theta Tau International in the publication or presentation of the research findings.
6. Publish or present the findings of the research in a program sponsored by Theta Epsilon Chapter, if invited to do so.

Title of Study: _____

Date signed: _____ Expected date of final report: _____

Principal Investigator signature: _____

Address: _____
City State/Province ZIP/Postal Code

Office Phone: _____ Home Phone: _____

Co-Investigators Signatures:

Addresses: Name:

Address:

Phone:

Data collection dates: _____

**Sigma Theta Tau International
Chapter Research Grant
Application Form – Page 2**

1. Date: _____
2. Title: _____
3. Name of Principal Investigator: _____
Home address: _____
City: _____ State: _____ ZIP/Postal Code _____
Home Phone: _____ Work Phone: _____
4. Registered nurse in state(s) of: _____ License #: _____
a. Sigma Theta Tau member: Yes No Chapter: Theta Epsilon
5. Previous Sigma Theta Tau International Research Awards:
None: _____

Chapter: _____

International: _____
6. Have you applied for or are you now receiving support for this research? Yes No
If yes, list agency: _____ Amount requested/received: _____
If other support is received, please notify _____ Chapter Research
Committee Chair.
7. Human subjects review? Yes No
Consent form included in proposal? Yes No
8. Co-investigator? Yes No If yes, CV attached
Name: _____ Name: _____
Address: _____ Address: _____

Phone: (H) _____ (B) _____ Phone: (H) _____ (B) _____
9. Information completed by student(s)
Degree sought: _____ Expected date: _____
Specify the amount of the program completed to date: _____
Courses completed are listed in Part III-C of the proposal _____
University: _____ College: _____
Department: _____ Major: _____

Minor(s) (if applicable): _____

**Sigma Theta Tau International
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Application Form – Page 3**

Name of Research Advisor, academic credentials (attach CV) and qualifications:

Letter from advisor is included in Part III of the proposal: Yes No.

Part IV. Budget – Detail the Amount Requested

a. Personnel	\$
b. Supplies	\$
c. Equipment	\$
d. Travel	\$
e. Computer	\$
f. Other	\$
	<u> </u>
	\$500.00

10. Total amount of budget requested in US dollars: \$ 500.00

11. Please check the materials accompanying this application:

- Research Grant Agreement
- Research Grant Proposal
- Other _____

This section below is to be completed by the Chapter.

A. Approval date: _____

B. Award granted: \$ _____

Chapter Research Committee Chair Signature: _____

C. Progress Reports:

Date: _____

Date: _____

Date: _____

Date: _____

Study completed (date): _____

Monies used: _____

Monies returned: _____

Final report date: _____