



## GRANT APPLICATION FORM

### *Institution Project*

**For office use only**

**ECU Application n°: A**

**Date received:**

**ECU-RF review date:**

**Accepted: Yes:  No:**

**Notification date:**

### GENERAL INFORMATION

TITLE OF PROPOSAL:

New project: Yes  No

Follow up of ECU Grant n°:

Project duration:

Beginning:

Is a follow-up foreseen? Yes:  No:

Total amount requested from ECU

Currency

Total amount requested from the ECU for the first 12 months

Currency

#### Principal Investigator

Last Name

First Name

Applicant Institution

Title at Institution

University /DC degrees

Institution

Professional Address

E-Mail

Tel:

Fax

#### Official authorized to sign for Applicant Institution

Last Name

First Name

Title at Institution

Professional Address

E-Mail

Tel:

Fax

**Signature\*:**

**Date:**

## Principal Investigator

*I agree to accept the responsibility of the scientific conduct of the project and to provide the required progress reports and final reports, as well as all publications resulting from this study if a grant is awarded as a result of this application.*

**Signature\*:**

**Date:**

**Please send 2 copies:**

an electronic one, by E-mail, to: [s.m.rubinstein@vu.nl](mailto:s.m.rubinstein@vu.nl)

**one hard copy signed, by regular mail, to:** Sidney Rubinstein, DC, PhD; VU University Amsterdam, Dept. of Health Sciences, Section Health Economics & Health Technology Assessment, de Boelelaan 1085, 1081 HV Amsterdam, The Netherlands | room U422  
Tel (+31) 20 598 2520

**N.B.** If awarded, the grant will be notified by the ECU-RF Council chairman to the principal investigator and /or to the Institution, with copy to the ECU-RF Council members and ECU treasurer.

### **BUDGET FOR ENTIRE PROPOSED PROJECT PERIOD**

**Amount requested from ECU**

**(NB: The annual contribution of the ECU to the ECU-RF is €62.000)**

<b>Budget Categories</b> Please Specify the Currency Selection =>	<b>1<sup>st</sup> year</b>	<b>2<sup>nd</sup> year</b>	<b>3<sup>rd</sup> year</b>	<b>4<sup>th</sup> year</b>
<b>* Personnel</b>				
<b>Equipment</b>				
<b>Supplies</b>				
<b>Rental Maintenance</b>				
<b>Computer</b>				
<b>Varia</b>				
<b>TOTAL PER YEAR</b>				

\* consultant specialists or other support personnel

# DOCUMENTATION REQUIRED FOR ALL RESEARCH PROPOSALS

*Each item needs to be addressed. Please, indicate when not applicable*

## Details of lead applicant and collaborators

Name  
Specialty  
Post held  
Contact details  
Employer

### Short Curriculum vitae:

- Name, DOB
- Degrees, awarding body, class and date
- Present and previous positions held
- Recent relevant publications (3-4)
- Research grants held in past 3 years

## Research proposal

1. **Summary:** includes full title of project and a structured abstract (<200 words) with:

- Main research question
- Methodology
- Main outcome measures
- Main applicant's name and organization
- Proposed starting date and duration of project
- Location
- Summary of support requested broken down by each year

## 2. Project Outline

Research objectives (list)

Concise description of methodological design (e.g. qualitative pilot study using....)

Sample data

- Sample groups
- Sample size
- Exclusion criteria
- How sample size was determined?
- Was there formal statistical input to the design?
- Main outcome measures (list)

Details of the proposed investigation (full description)

- Title
- Full background, including literature reviewed, and data bases used.
- Methods
- Experiments or studies proposed
- Value of the research to patients
- Detailed justification of support requested (staff, consumables etc)
- Project milestones (use bar graph/gant chart, but restrict it to the execution of the project)
- References

#### **Other information**

- Whether any data have already been collected?
- Whether the research is likely to lead to commercially exploitable results?
- Plans for implementation/dissemination of results
- Any use of animals
- Peer reviewers if desired

#### **Finance and Costs**

**Details of posts and salaries include totals of the full project, not only of the grant applied for.**

- **Name, grade and weighting, increment date, salary, other allowances, superannuation/national insurance**
- **Total costs year 1**
- **Ongoing annual costs each year**
- **Travel and subsistence costs (details and amount each year)**
- **Consumables each year**
- **Equipment costs each year**
- **Summary of total costs for each year under above headings**
- **Total costs**

**Please refer to the rules of the ECU Research Fund Policy: Institutional Projects**

- **Resources and environment**

*This part should give information on the facilities and equipment that the investigator and/ or the institution can use for the present research (besides those for which this application is made).*

- **Personnel: investigators, secretary, consultants, etc with % effort on project.**
- **Major equipment: treatment tables, computers, etc.**
- **Facilities: laboratory, clinics, offices, hospital (proximity, availability...).**

#### **Declarations**

**Signatures of all applicants and date**

**Signature of finance officers and declaration that they have checked the financial details and will administer the award.**

**Whether hospital facilities, staff or patients will be involved and if so, authorization by clinical director?**

**Whether ethical approval is required? If not: why not. If yes: which research ethics authority?**

**Whether a related application has been submitted elsewhere and where?**

#### **Appendices**

**Forms**

**Questionnaires**

**Documents to be used in project**

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