****

**Theta Kappa Research Grant Application Form**

**Cover Sheet**

**Date**:

**Title of Research Proposal**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1. Principal Investigator**:

Name and Credentials: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_ e-mail: \_\_\_\_\_\_\_\_

**2. Co-Investigator:**

Name and Credentials: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_ e-mail: \_\_\_\_\_\_\_\_

**3. Theta Kappa Member**

 Principle investigator: Yes\_\_\_ No\_\_\_

 Co-Investigator: Yes\_\_\_ No \_\_\_

**4. Have you applied for or are you now receiving funding support for this research?**

 Yes \_\_\_ No \_\_\_

If yes, list agency and amount of support requested and/or received?

**5. IRB:**

 Have you applied for IRB review:

 Yes \_\_\_ No \_\_\_ If no, describe plans to submit research for IRB review.

 Include consent forms in the application packet.

 **\*Funds will only be released upon receipt of documentation indicating IRB approval.**

**6. Students only:**

 Name of research/scholarly project advisor: \_\_\_\_\_\_\_\_\_\_\_\_

 Include a letter of support from advisor in application packet.

**Research Application Checklist: (please include the following in your application)**

* Proposal Cover Form
* Abstract
* Narrative
* Budget and Budget Justification
* Timeframe
* References
* Appendices (including consent forms and letter of advisor support, if applicable)
* Bio Sketch

If funding is approved I agree to do the following:

* Accept responsibility for the scientific conduct of this study
* Expend the funds as described in the proposal
* Return unused funds to the treasurer of the Theta Kappa Chapter
* Submit a progress report every six months until the study is complete
* Send a written final report of study findings to the President, Theta Kappa
* Acknowledge grant support from Theta Kappa Chapter of Sigma Theta Tau International in all publications or presentations of the research findings
* Present the findings of the research in a Theta Kappa program.

Principal Investigator (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_