

**Sigma Theta Tau International
Alpha Iota Chapter
Research Grant Application Form**

Directions: Complete and sign this form. Submit the completed form with the grant application.

Title of Study: _____

Date Signed: _____ Expected date of 6 month report: _____

Expected data of final report: _____

Principle Investigator: _____

Email address: _____

Alpha Iota Member #: _____

Address: _____

City: _____ State: _____ Zip: _____

Office Phone: _____ Home phone: _____

Co-investigator Information:

Name: _____

Address: _____

Name: _____

Address: _____

IRB Project Number: _____ IRB Approval Date: _____

Institution Granting IRB approval: _____

Attach copy of IRB letter noting full approval of study. Grant applications will NOT be reviewed without IRB approval letter in grant application.

Planned date of beginning study: _____

If my proposal is approved for funding, I agree to (please initial each item):

___ 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 Alpha Iota Chapter.

___ 3. Submit a 6 month progress report including proposed budget and actual expenditures to the Alpha Iota Treasurer and Research Chairperson so that the second half of the funds can be paid to recipient.

___ 4. Send a written final report including proposed budget and actual expenditures to the Alpha Iota Treasurer and Research Chairperson.

___ 5. Acknowledge the grant support of Alpha Iota 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 Alpha Iota Chapter if invited to do so.

Signature of Grant Applicant: _____ Date: _____

