

IMPORTANT NOTICE

Policy on Incomplete Applications

All applicants are strongly cautioned to carefully READ and FOLLOW the instructions and requirements outlined in the "Guidelines for Applicants" and the Checklist page of the application form.

In order to maintain the principle of fairness to all, regulations MUST be adhered to in the preparation of Knowledge to Action Grant applications. ANY infraction of the rules will lead to the truncation or immediate rejection (without appeal) of the application. These regulations have the advantage of being unambiguous for applicants, easily enforceable by staff and/or review panels, and absolutely fair and equitable for all applicants.

See the "Frequently Asked Questions" for more information.
(<http://www.hsf.ca/research/en/frequently-asked-questions>)

******KNOWLEDGE TO ACTION GRANT APPLICATION 2015**
CHECKLIST - COMPLETE AND FORWARD THIS SHEET WITH YOUR APPLICATION

Name _____

Date _____

A CONTENTS OF COMPLETE APPLICATION

The original application must be assembled in the following order and in addition to this checklist, submitted to the Heart and Stroke Foundation, BC & Yukon.

- | | | | |
|---------------------------------------|---|----------------------------------|---|
| <input type="checkbox"/> Page 1- | Administrative information- Items 1 through 9 completed. | <input type="checkbox"/> Page 6- | Budget- including budget justification, additional to form not to exceed three pages. Additional pages should be numbered #a, #b, #c. |
| <input type="checkbox"/> Page 2- | Common CV- complete and attach a copy of the Common CV (HSFC version) for the Principal Investigator and any Co-Applicant(s). | <input type="checkbox"/> Page 7- | External referees- names and contact information of potential external reviewers as per the form. |
| <input type="checkbox"/> Pages- 3 & 4 | Structured lay summary of the research proposal completed. | <input type="checkbox"/> Page 8- | Ethical and safety considerations- appropriate institutional approvals and signatures. |
| <input type="checkbox"/> Page 5- | Proposed research- one page on the form plus up to two additional pages for three page maximum. Charts or data and/or appendix, additional to form as required. | <input type="checkbox"/> Page 9- | Signatures required as per the guidelines. |

MAILING

The application and copies must be received no later than June 22, 2015 @ 4:30 p.m. at:

TWO COPIES

200-1212 West Broadway
Vancouver, British Columbia V6H 3V2
Attn: Coordinator, Research and Health Promotion

CONFIRMATION OF APPLICATION SUBMISSION

The HSF will acknowledge receipt of applications via email to the applicant listed on page 1, item 3. Allow four weeks for application processing before acknowledgement is sent.

Name _____



**HEART AND STROKE FOUNDATION (HSF), BC & YUKON
KNOWLEDGE TO ACTION GRANT 2015**

Knowledge to Action I

Knowledge to Action II

1.	Name of Applicant (Last name , first name, initial)	Salutation	Date of Birth (mm/dd/yyyy)* Male Female
*Providing your date of birth on the application form will ensure accurate identification of applicants and may be used by HSF for statistical purposes. This information will NOT be transmitted to any entity outside of the Heart and Stroke Foundation without the applicant's consent.			
2.	Citizenship Canadian Permanent Resident in Canada Foreign		
3.	Mailing Address	Telephone Fax E-mail	Ext.
4.	Present Appointment (Academic level, Title, Department, Institution and Start Date)		
5.	Name(s) of Co-Applicant(s) Mailing Address Continue on separate page if required.		
6.	Name other agencies to which application for support has been made or will be made		
7.	List no more than five keywords which identify your research project		
8.	Title of research project (12 words or less)		
9.	Estimate what proportion of the proposed research project falls under the following four health research themes. The total of all themes should equal 100%. Refer to guidelines for descriptions of each theme. _____ % Basic Biomedical _____ % Clinical _____ % Health Services/Systems _____ % Social, Cultural, Environmental and Population Health		

10. Common CV

For the Principal Investigator and Co-Applicant(s) listed on Page 1, please complete and attach a printed copy of the Common CV form (HSFC version). This is a web-based form that will allow you to enter your CV information online. Please refer to the website www.ccv-cvc.ca for further instructions.

11. Structured Lay Summary and Impact Statement**Knowledge to Action II applicants only.**

The Foundation offers support for projects in the area of cardiovascular or cerebrovascular research. It places a priority on ensuring that the research it funds is relevant to its goals.

Using language targeted to a general, lay audience, in the space provided, please describe the health issue or problem the research is intended to address, how it will do so, how this is relevant to the HSF goals, and what makes this project so unique and innovative.

Applications without a response to each sub-section will be considered incomplete. The Heart and Stroke Foundation reserves the right to decline incomplete applications.

This information will be used by the lay reviewer in assessing lay language and to facilitate communications to the public and our donors about the research supported by the Foundation.

* See the Frequently Asked Questions section for information on how to use Microsoft Word® spelling and grammar check to assess grade level (www.hsf.ca/research/en/frequently-asked-questions)

a) Statement of the health problem or issue

b) Objective of your project

11. c) How will you undertake your work?

d) What is unique/ innovative about your project?

e) How is the proposed research directly relevant to heart disease and/or stroke?

f) Impact statement: How does the proposed research contribute to achieving one or both of HSF's Impact Goals, as stated in Section 1 of the Guidelines?

12. Proposed Research/Project

Describe the rationale, hypothesis, objective and experimental approach of the proposed research and the timeline.

Attached pages [no more than two (2) additional pages- three (3) pages maximum] should be single-spaced using either 12 point Times New Roman or 11 point Arial font. Condensed type or spacing will not be acceptable. A margin of 2 cm around the page is required. **Each additional sheet must be numbered #a and #b.** Use an additional page for charts and/or data if required.

Knowledge to Action I applicants: Describe the proposed project and what it is designed to accomplish. Include projected outcomes. An appendix with proposed agendas and speakers may be included.

Knowledge to Action II applicants: Detail the results of your previous operating grant and how these will be applied in clinical or community settings. Identify implementation partners and their role(s) in the project.

13. Requested Budget			
a) Salaries and benefits		2015/2016	
Position/Type (list all personnel)		HSF	Other
1)	Salary		
	Benefits		
2)	Salary		
	Benefits		
3)	Salary		
	Benefits		
4)	Salary		
	Benefits		
5)	Salary		
	Benefits		
Note: If more than 5 positions, list on additional sheet and include in total.			
TOTAL	Salaries		
	Benefits		
Knowledge to Action I applicants: Matching funding is required. Enclose a written confirmation of the matched funding by the funder.			
<input type="checkbox"/> Form included <input type="checkbox"/> Form to be sent			
b) Meeting venues and logistics			
c) Stipend/honoraria			
d) Travel and accommodation			
e) Materials and supplies			
f) Educational and training activities			
g) Publications			
h) Contracts			
i) Other (specify)			
TOTAL REQUESTED			
Note: HSF will not support equipment requests in this program. All budget items must be justified using no more than three additional sheets. Each additional sheet must be numbered #a, #b, #c.			

14. External Referees
Knowledge to Action II applicants only.

List up to three referees in Canada considered appropriate to review this application. These suggested individuals, with whom you do not collaborate (i.e. no conflicts of interest), must be impartial and have the necessary expertise to critically evaluate the application.

1) Name of referee

Telephone

E-mail

2) Name of referee

Telephone

E-mail

3) Name of referee

Telephone

E-mail

If necessary, please indicate up to two referees to whom you would prefer that your application NOT be sent.

15. Ethical and Safety Considerations

1) Animal Research

Enclose a statement signed by the applicant and the department head that the research protocol and the care of the animals conforms to the Guiding Principles for Animal Experimentation as enunciated by the Canadian Council on Animal Care.

 Form included Form to be sent Not applicable

2) Human Research/Stem Cell Research

Enclose a statement signed by the applicant and the department head that the proposed research will be reviewed in a manner which conforms with the guidelines as outlined in the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans and/or Human Pluripotent Stem Cell Research: Guidelines for CIHR-Funded Research, and that the proposed research will not be undertaken until it has been accepted as ethical by such a review.

Does this research involve:

 Human subjects Form included Form to be sent Human pluripotent stem cells Form included Form to be sent Not applicable

3) Biological and Chemical Hazards

Enclose a statement signed by the applicant and the department head that the proposed research will be reviewed in a manner which conforms with the guidelines as outlined in the Health Canada Laboratory Biosafety Guidelines and that the proposed research will not be undertaken until it has been accepted as meeting the requirements regarding biological and chemical hazards by such a review.

 Form included Form to be sent Not applicable

Name _____

16. Name, title and institution of administrative or financial officer who will administer funds on behalf of the Foundation.

17. APPLICANT SIGNATURE

By signing below the applicant agrees to abide by all regulations and policies governing this award, if granted, including HSF's Research Integrity Policy (refer to guidelines), and authorizes the institution to provide HSF with personal information as required in the application of these regulations and policies. The applicant's signature also confirms that the applicant is not currently barred from applying to the Heart and Stroke Foundation or any other research funding organization (e.g., CIHR, NSERC, SSHRC, provincial funding organizations) for reasons of breach of standards of ethics or integrity (i.e., financial or scientific misconduct).

Date _____ Signature _____

18. INSTITUTION SIGNATURES

Dean _____ Department Head _____

Signature _____ Signature _____

Date _____ Department _____

Institution _____

Date _____