

Student Research Grant | Application

Student Applicant Information		
Name of Applicant		Applicant Email Address
Department / Program of Study		Student Level
Name of your Research Supervisor / Faculty Sponsor		Research Supervisor Email Address
Title of Research Project or Activity		
Amount Requested (Max: Undergraduate \$1,500 / Graduate \$2,000)	Have you received a Student Research Grant before?	
	No <input type="checkbox"/> Yes <input type="checkbox"/> Date of Award:	

Research Activity Information		
This Application is for (Check One):		
Presenting my research at a conference <input type="checkbox"/> Complete Section A only Research Project <input type="checkbox"/> Complete Section B only		
Section A: Conference Details Only complete this section if you are applying for funds to present your research at a conference		
Name of Conference / Event		
Host Organization of Conference		Link to Conference / Event Website
Location of Conference (City, Country)		Type of Travel (Check one)
		Canada <input type="checkbox"/> USA <input type="checkbox"/> International <input type="checkbox"/>
Dates of Conference		
Conference Start Date:		Conference End Date:
Role and Participation in the conference (check all that apply)		
Invited Oral Paper Presenter <input type="checkbox"/>	Invited Poster Presenter <input type="checkbox"/>	<input type="checkbox"/> Other (describe)
Describe the adjudication/selection process for the conference (i.e. peer reviewed or juried abstract submission).		

Will the proceedings be published?			
No <input type="checkbox"/>	Yes <input type="checkbox"/>	If Yes, describe the publication and distribution:	
Importance of Conference: Explain the importance of this conference and why it is the most appropriate venue for your work.			
Research Description: Provide a brief overview of the research being presented at the conference			
Section B: Research Project Details Only complete this section if you are applying for funds to support a proposed research project			
Research Description: Provide a brief overview of the proposed research project. Include research question, objectives, project design, time frame, and how you will disseminate your results			
Related Research: Describe any related research currently in progress (if applicable)			
Research Certifications: Indicate if your research project involves:			
Human experimentation <input type="checkbox"/>	Animal experimentation <input type="checkbox"/>	Biohazards <input type="checkbox"/>	Hazardous compounds <input type="checkbox"/>
If Research Ethics Board (REB) review was required, was the outcome of that review successful?			
Yes <input type="checkbox"/> Please attach a copy of the REB letter		No <input type="checkbox"/> Funds will not be released unless REB approval has been successful	
Department Approvals			
Have you informed your Department Chair or Program Coordinator of your research plans? Yes <input type="checkbox"/> No <input type="checkbox"/>			
If your research involves the use of Concordia facilities and/or supplies, does your Department Chair or Program Coordinator agree to this usage? Yes <input type="checkbox"/> No <input type="checkbox"/>			
For the Department of Biology: If your application includes the purchase of supplies or equipment, please notify Lab Manager Devin Hughes, devin.hughes@concordia.ab.ca before checking the box above.			

Research Description *All applicants complete this section*

How does the proposed project align with Concordia's Strategic Research Plan? (200 words maximum)

View Here: <https://concordia.ab.ca/research/research-at-concordia/strategic-research-plan>

How does the proposed project benefit you, your Research Supervisor, and Concordia?

What skills, experience, and background does your Research Supervisor have to enable you to successfully complete the project?

What skills, experience, and background do you have to enable you to successfully complete the project?

Proposed Budget

If required, add more lines or attach additional pages. Include quotes for travel costs and for equipment / supplies costs. All items must be in Canadian dollars.

Travel	Identify person(s) traveling and list the location(s) visited. Attach airline quotes to estimate cost of travel. Consult Institutional Travel Policy for eligible expenses. Provide brief rationale for all expenditures and justification for unique requests such as car rental. Use separate page if needed		
	Destination	Total Cost	Justification
Air Travel			
Ground Travel (taxi, shuttle, public transportation)			
Mileage			
Conference Registration			
Other			
Other			
Subsistence	Specify per diem and accommodation amounts. Attach accommodation quotes to estimate total cost. Consult Institutional Travel Policy for current per diem rates and eligible expenses.		
	Number of Days	Rate	Total Cost
Accommodation			
Per diem			
Other			
Equipment, Supplies and Materials	Justify items and discuss the availability and accessibility of similar items within the institution and city. For equipment, give models, manufacturers. For items over \$500, attach quotes. Use separate page if needed		
Item	Total Cost	Justification	
	N/A		
	N/A		
TOTAL COST FOR EQUIPMENT, SUPPLIES AND MATERIALS			
Other Expenses	Items should be described clearly. Use separate page if needed.		
Item	Total Cost	Justification	
TOTAL COSTS			
FUNDS FROM OTHER SOURCES (ie Professional Development funds)			
TOTAL GRANT REQUESTED			

Signatures and Approvals

Approvals are required from your Research Supervisor and the Chair of your Department

Student Applicant

- Agree to participate as outlined;
- Verify they have the necessary time and other requirements to fulfil the proposed activities;
- Agree to comply with policies and procedures and the terms and conditions of this funding program.

Student Applicant	Signature	Date
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Research Supervisor

- Agree to participate as outlined, including supervision of student research;
- Verify they have the necessary time and other requirements to fulfil the proposed activities;
- Agree to comply with policies and procedures and the terms and conditions of this funding program.

Name of Research Supervisor	Signature	Date
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Department Chair

- Have read the research proposal and agree that the obligations can be fulfilled;
- Verify that the applicant and/or co-applicant(s) have the necessary time and facilities to carry out the research;
- Agree that resources identified in the proposal will be available to complete the project.

Name of Department Chair	Signature	Date
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Application Checklist

☐ Completed Application Form

☐ Attachments to the Application

☐ Student CV

☐ Conference Acceptance Letter or invitation to present (or indicate if pending ☐)

☐ Abstract of conference presentation or activity

☐ Travel Quotes or screen grabs for flight and accommodation, registration fee (indicate if not applicable ☐)

☐ Quotes for other expenses such as equipment and supplies (indicate if not applicable ☐)

☐ Signatures

Submission Instructions: Email signed application package with attachments **as a single PDF file** to research@concordia.ab.ca