**IRF Phase 2 and 3 Funding Application**

1. **Signatures: Phase 2 Phase 3**

**Name Signature Date**

|  |  |  |  |
| --- | --- | --- | --- |
| **Dean:** |  |  |  |
| **Associate Dean or Director:** |  |  |  |
| **Program Head /  Chief Instructor  (or equivalent):** |  |  |  |
| **Researcher :** |  |  |  |

1. **Letters of Support:**

|  |  |
| --- | --- |
| **Letter from Dean or VP attached, confirming any additional funding?** | Yes / No |
| **Letters of support from internal and external partners attached?** | Yes / No |

1. **Research Ethics Board Approval (if required):**

|  |  |  |
| --- | --- | --- |
| **Does this project involve human subjects?** | | Yes / No |
| **Does this project involve animals?** | | Yes / No |
| **Has Research Ethics Board approval been obtained?** | | Yes / No |
| **Date of approval**: | **Certificate #**: | |

1. **Intellectual Property Protection (if required):**

|  |  |  |
| --- | --- | --- |
| **Is the proposed activity likely to result in protectable Intellectual Property?** | | Yes / No |
| **Has Intellectual Property been disclosed to ARLO?** | | Yes / No |
| **Has provisional protection been initiated?** | | Yes / No |
| **Date of ARLO contact**: | **File #**: | |

1. **Research Proposal:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. **Research Program Title**: | | | | |
| 1. **Date of Application**: | | | | |
| 1. **Project Start and End Dates**: | | | | |
| 1. **Name of Researcher**: | | | | |
| 1. **BCIT Department**: | | | | |
| 1. **BCIT School / Division**: | | | | |
| 1. **Researcher Background Information (2 pgs. max)**: Research interests, industry experience, publications (papers, presentations, reports), BCIT service, courses instructed, etc. | | | | |
| 1. **Summary of Proposed Research (4 pgs. max)**:   **Internal Institute Reach**  List BCIT programs that will benefit and how they will benefit; Number of students that will benefit including educational, research and student employee benefits by category and how; Number of faculty and/or staff that would be able to participate in research programs; Associated Educational programming (workshops, symposiums, lectures, events):  **Long Term Funding Plan** (How will the research program allow the applicant to have demonstrated the potential to achieve international recognition in their fields in the next five to ten years and obtain external long term funding) | | | | |
| 1. **Total amount of funding requested:** | | | | |
| **Year 1** | | **Year 2** | **Year 3 (Phase 2 Only)** | |
| $ | | $ | $ | |
| 1. **Funding available from internal and external partners (specify)**: | | | | |
| 1. **Budget:** Please provide a detailed list of budget expenses for the research program. Eligible expenses include backfill and benefit costs, materials costs, travel costs (2 pgs. max.)   **Please itemize the projected expenses: Estimated amount:** | | | | |
| **1.** |  | | | $ |
| **2.** |  | | | $ |
| **3.** |  | | | $ |
| **4.** |  | | | $ |
| **5.** |  | | | $ |
| **6.** |  | | | $ |
| **7.** |  | | | $ |
| **8.** |  | | | $ |
| **9.** |  | | | $ |
| **10.** |  | | | $ |
| **Total:** | | | | **$** |

|  |  |  |
| --- | --- | --- |
| **Budget Justification (1 pg. max.)**: | | |
| 1. **Description of existing or proposed facilities required to successfully complete the research project (1 pg. max.)**:   Existing facilities and how they would be used to support research program; Existing, ongoing research activity in or related to research program; Existing departmental funding for research activity in or related to research program:  New Facilities to be created and how they would be used (cost estimate, source of funds); New Departmental Funding Allocations for support of research program: | | |
| 1. **Description of student participation in the project – numbers of students, educational program(s), project activities**: | | |
| 1. **Description of partnerships with other BCIT Schools or departments required to complete the project**: | | |
| 1. **Description of external partnerships (industry; university, institute or college; non-profit organizations) required to complete the project**: | | |
| 1. **List other personnel required to support the research project. Include time estimates and roles in the project**. | | |
| **1.** |  |  |
| **2.** |  |  |
| **3.** |  |  |
| **4.** |  |  |
| **5.** |  |  |
| **6.** |  |  |
|  | | |
| 1. **Reporting Criteria:** Each funded project will be evaluated at the end. Please suggest evaluation criteria and timing that would be appropriate to evaluate the success of your project. | | |