

Emerging Researcher Initial Application Form

Directions for submission: Complete this form electronically and submit the completed form by email to foundation@asrt.org.



Funding Level: Up to \$4,000

FOR OFFICE USE ONLY: Application #

Title of Project:

Principal Investigator:

☐ Mr. ☐ Ms. ☐ Dr. ☐ Professor ☐ Other:

Name

Last

First

MI

Credentials / Title

Institution

Mailing Address

Phone ()

Email

ASRT Member Number

Please fill out this section ONLY if invited to complete this final application content.

Grant Amount Requested:

First Year

\$

Co-Investigator(s):

Name and Title

Name and Title

Name and Title

Responsible Officials of Applicant's Institution:

Grants Administration

Name

Title

Address

Signature

Date

Academic or Clinical Department

Name

Title

Address

Signature

Date

I certify that I have applied for all necessary approvals by appropriate boards or committees at my institution and will provide proof of final approval prior to receiving funds. I certify that this application contains no misrepresentations or falsification and that the information given is true and correct to the best of my knowledge. I understand that any false statements made herein will void this application and I will be ineligible for support from ASRT Foundation. I hereby authorize the release of all information contained in this application packet as may be required to determine my eligibility for an award. I hereby waive my rights to review any documents pertaining to my application once submitted.

I understand that if these funds are granted, submission will be required of a progress and/or final report to the ASRT Foundation. Any publications resulting from this research must state that the ASRT Foundation funded this project. Papers generated from this grant will be required to be submitted to ASRT peerreviewed publications, Radiologic Technology and/or Radiation Therapist. I also understand that I may be required to present the research findings at an ASRT conference if appropriate.

Signature of Principal Investigator Date

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Emerging Researcher Grant

INITIAL APPLICATION FORM

- 1 Provide a statement in support of how your research project supports the ASRT Foundation's mission**

- 2 State the background and significance of the problem your research will address**
(use AMA reference style for citations, use attachment for reference page)

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INITIAL APPLICATION FORM

3

State the aims and specific objectives your research will address

4

Provide an overview of your research methodology

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INITIAL APPLICATION FORM

- 5** Provide specific details of any progress you have achieved to date on obtaining IRB approval or your anticipated timeline for obtaining it by the final application deadline. Funding will not be released until approval documentation is received.

- 6** Provide a timeline of your project from start to completion

Total Over-all Budget:

Salary:

Supplies (survey, paper, postage, etc.):

Equipment:

Misc:

References:

Appendices

1 CV/Resumes

A curriculum vitae is required for the PI and co-investigators and should address experience and education specifically appropriate to the research project. Each CV or résumé may not exceed two pages in length.

2 Current Registration/ Licensure

The PI must provide proof of current U.S. registration/licensure as specified in the eligibility section of the packet.

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3 Institutional Assurances/ Human Assurances/ Institutional Review Board

The application must include documentation of all necessary institutional approvals by appropriate boards or committees. These documents must be specific to the proposed investigations, including the time period for which the grant is requested. If the application for such approvals has been made, but not acted upon at the time of submission, a copy of that application may be substituted. However, the Foundation must receive official approval by the relevant boards or committees before a final funding decision is made.

4 Cooperating Institutions

Applications for projects involving institutions or agencies in addition to the institution of the grantee must include a letter from an official of each facility acknowledging its role in the project.

ATTACH DOCUMENTS

Use button to attach each document. View attached documents in the Navigation Pane to the left.

I agree to submit a final manuscript to Radiologic Technology or Radiation Therapist upon completion of my project for consideration of publication.