

# **Application Form**

2024-2025







## THIS DOCUMENT IS FOR REFERENCE ONLY. THE WEBFORM VERSION MUST BE USED FOR ALL SUBMISSIONS

#### Instructions

- Applicants should carefully read the <u>CARIF Guidelines</u> before starting. *This application must be prepared in accordance with these guidelines.*
- Only applications that have been approved through the Letter of Intent (LOI) process are eligible for submission.
- Final reports for previously supported projects must be approved and received by the <u>Centre for Applied Research, Innovation and Entrepreneurship (CARIE)</u> PRIOR to the submission of any new CARIF applications. If you did not complete the project, you are still required to submit a Final Report.
- The completed application must be received by CARIE by **4:00 PM on the first Wednesday following Reading Week.** Deadline extensions are not possible due to adjudication timelines .







## Applicant information

| Name of Applicant           |   |     |    |
|-----------------------------|---|-----|----|
| Centre or<br>Department     |   |     |    |
| School or Unit              |   |     |    |
|                             |   |     |    |
| Have you previously         | y SUBMITTED a CARIF application?                | YES | NO |
| In which <b>YEAR</b> did yo | ou submit your previous application?            |     |    |
| What was the <b>PROJE</b>   | ECT TITLE of your previous application?         |     |    |
| Was your previous a         | pplication awarded CARIF funding?               | YES | NO |
|                             |   |     |    |
| = =                         | n include a co-applicant? mplete the following: | YES | NO |
| Name of<br>Co-Applicant     | 60  |     |    |
| Centre or<br>Department     |   |     |    |
| School or Unit              |   |     |    |
| Rationale for submi         | itting a joint application (200 words)          |     |    |



## **Project information**

| Project Title                |  |                   |      |
|------------------------------|--|-------------------|------|
| Start Date                   |  |                   |      |
| End Date                     |  |                   |      |
| Project Overview: <i>U</i> . | he status of any existing or recent requests f<br>external) for the proposed project.  Sing lay terms, please describe your project. To sees such as Lethbridge College publications, no | his will used for |      |
|                              | coordinate this project with an CExchange or SSHRC Explore?  | YES               | O NO |





#### If applicable, please indicate the type(s) of external partners involved in the project:

| Industry  | Non-Profit                 |  |
|---|----------------------------|--|
| Federal Government  | Provincial Government      |  |
| Other Government  | Other (Ex. Post-Secondary) |  |
| Please specify the names of all partner agencies and/or organizations |                            |  |
|   |                            |  |

#### Main proposal

Use the Selection Criteria found in the <u>CARIF Guidelines</u> as the guide. Attach a detailed description of the proposed project using the subheadings below as the template.

**Do not exceed 5 pages. A 6th page is permitted for references only.** Charts, graphics, illustrations, and photos are allowed inside the main text. No other attachments are permitted. Please adhere to the style guidelines of: 12pt Arial font, minimum 6 lines of type per inch, and a minimum margin of ¾" or 1.87cm.

- 1. **Background and literature review** Clearly define the problem to be solved. Provide any relevant background information and situate the proposed research within the current scholarly literature, identifying the relevant knowledge / research gaps.
- 2. **Objectives** Describe the objectives and purpose of the proposed research.
- 3. **Methodologies** Describe the framework and methodologies to be used.
- 4. Outcomes/Deliverables Describe the anticipated outcomes and deliverables.
- 5. **Work Plan** Detail the milestones, activities, and timeline needed to complete the project (a chart or table is recommended). Identify any potential risks that could delay or impact the project.

  Describe how these risks will be mitigated.
- 6. **EDI Integration** Explain how Equity, Diversity and Inclusion (EDI) has been considered and authentically embedded into the project (avoid generic statements and unactionable outcomes).
- 7. **Data Management Plan** Detail the collection, use, storage, security, and dissemination of all data as per <u>Appendix A: Applied Research and Scholarship Procedures in the Applied Research and Scholarship Policy.</u>



- 8. **Research Team** Explain how the knowledge and experience of the applicant and/or co-applicant will contribute to achieving project success.
- 9. **Student Involvement** Describe how students will be involved as research team members and the resulting benefits to their education. *If students are not involved, please provide an appropriate justification*.
- 10. **Alignment and Potential Partnerships** Describe how the proposed research contributes toward a long-term vision and plan for research. How does it align with your Centre or Department goals and strategies? How will the proposed research lead to new external or internal partnerships and funding?
- 11. **Plan for Knowledge Dissemination/Technology Transfer** Describe the plan to disseminate the research and/or technology.
- 12. **Benefits to Lethbridge College, partners, and the community** Describe how the proposed research will specifically benefit Lethbridge College, any partners, and the broader community.
- 13. **Alignment with SSHRC Explore or SSHRC Exchange** (*If applicable*) If coordinating with a SSHRC application, describe how SSHRC funds will be used for a SEPARATE and DISTINCT component of the project and include a contingency plan should SSHRC funds NOT BE awarded. Please note that your CARIF application will be shared with the SSHRC Selection Committee to ensure proper alignment and to assist in the adjudication process. *Duplicate CARIF and SSHRC applications will not be approved*.

#### Ethics and hazards

| Will this proposed project involve human subjects?                  | O YES | O NO |
|---|-------|------|
| Will animals be used in the proposed project?                       | O YES | O NO |
| Will animals be used in the proposed project at any other location? | O YES | O NO |
| Will radioactive, biological, hazardous material or lasers be used? | O YES | O NO |





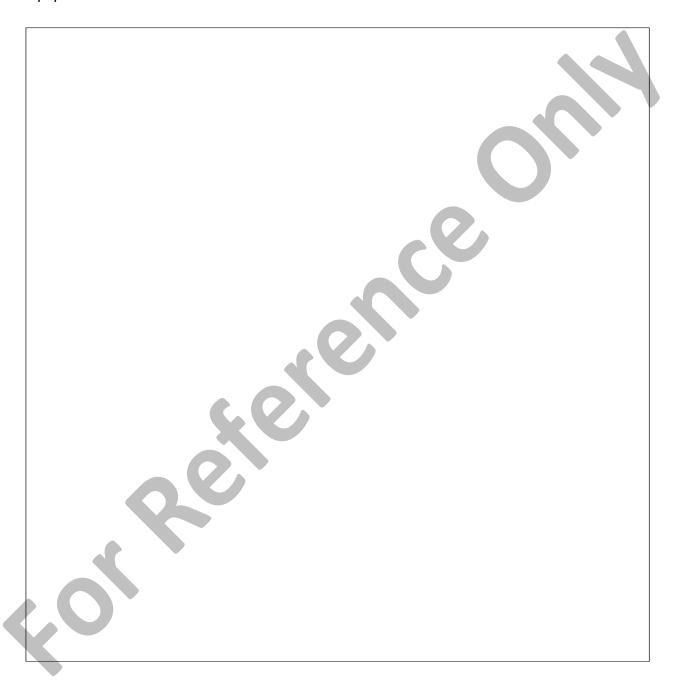
## Budget

Please use the <u>CARIF Guidelines</u> as a guide for creating your budget. The budget must be approved by a Financial Analyst to reflect actual costs of the project.

| Category   | Budget Item(s) | Object<br>Code | Cost<br>(Tax-inclusive) |
|--|----------------|----------------|-------------------------|
| <b>Work Coverage</b><br>(Instructor Course<br>Release & Staff<br>Back-fill)          |                |                |                         |
| <b>Salaries</b> (Student<br>& Professional)  |                |                |                         |
| Materials & Supplies (include shipping & taxes)                                      |                |                |                         |
| Equipment<br>(include shipping,<br>renovation,<br>installation, training<br>& taxes) |                |                |                         |
| Travel<br>(Collaboration &<br>Dissemination)   |                |                |                         |
| Others<br>(Please Specify)   |                |                |                         |
|  |                | TOTAL          | \$ 0.00                 |



**Budget Justification & Explanation**: Provide a <u>detailed justification for EACH budget</u> <u>item and relate it to the objectives and requirements of the proposed applied research project</u>. Please attach quotes and hyperlinks for all supplies, materials, and equipment.





## Suggested reviewers

| Are there any changes or u provided in the LOI? If no, t                                  | O YES   | O NO   |                               |  |
|---|---|--|-------------------------------|--|
| Reviewers may be faculty o must not be used as a resource and value as a reviewer for the | s or updates for the reviewers or staff, or they may be external ce or consulted during the application must also be stately reviewers suggested by the a | to the College; he<br>ation process. The<br>ed. It is at the CAP | owever, they<br>eir expertise |  |
| Name of Reviewer #1   |   |  |                               |  |
| Title and Organization  | and Organization  |  |                               |  |
| Contact Information   | Contact Information   |  |                               |  |
| Rationale For Use as a Re   | viewer  |  |                               |  |
| Name of Reviewer #2   |   |  |                               |  |
| Title and Organization  |   |  |                               |  |
| Contact Information   |   |  |                               |  |
| Rationale For Use as a Re   | viewer  |  |                               |  |





#### **Applicant acknowledgement**

| ☐ I/We hereb | v accept th | e terms and | l conditions a | as outlined i  | n the CARII | Guidelines. |
|--------------|-------------|-------------|----------------|----------------|-------------|-------------|
|              | ,           | c ccs ac    |                | 45 C G C C G . |             |             |

| Applicant  | Co-Applicant |
|------------|--------------|
| Date:      | Date:        |
| Signature: | Signature:   |

### **Approvals**

| Applicant's Associate Dean | Co-Applicant's Associate Dean |
|----------------------------|-------------------------------|
| Date:                      | Date:                         |
| Name:                      | Name:                         |
| Signature                  | Signature                     |

| Applicant's Centre Dean (or Leader) | Co-Applicant's Centre Dean (or Leader) |
|-------------------------------------|--|
| Date:                               | Date:                                  |
| Name:                               | Name:                                  |
| Signature                           | Signature                              |

| Applicant's Financial Analyst | Co-Applicant's Financial Analyst |
|-------------------------------|----------------------------------|
| Date:                         | Date:                            |
| Name:                         | Name:                            |
| Signature                     | Signature                        |

