Praxis Funding Application Form

# Application Cover

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| **Application for** | | Translate research into neurorestorative treatments RFA  Supporting network to translate and implement evidence-based care RFA | | |
| **Project Title** | | Click or tap here to enter text. | | |
| **Amount Requested** | | Click or tap here to enter text. | | |
| **Nominated Principal Applicant’s Information** | | | | |
| **Name** | Click or tap here to enter text. | | **Position** | Click or tap here to enter text. |
| **Email** | Click or tap here to enter text. | | **Affiliation** | Click or tap here to enter text. |
| **Co-Principal Applicant’s Information (if applicable)** | | | | |
| **Name** | Click or tap here to enter text. | | **Position** | Click or tap here to enter text. |
| **Email** | Click or tap here to enter text. | | **Affiliation** | Click or tap here to enter text. |
| **Co-Principal Applicant’s Information (if applicable)** | | | | |
| **Name** | Click or tap here to enter text. | | **Position** | Click or tap here to enter text. |
| **Email** | Click or tap here to enter text. | | **Affiliation** | Click or tap here to enter text. |
| **Co-Principal Applicant’s Information (if applicable)** | | | | |
| **Name** | Click or tap here to enter text. | | **Position** | Click or tap here to enter text. |
| **Email** | Click or tap here to enter text. | | **Affiliation** | Click or tap here to enter text. |
| **Co-Principal Applicant’s Information (if applicable)** | | | | |
| **Name** | Click or tap here to enter text. | | **Position** | Click or tap here to enter text. |
| **Email** | Click or tap here to enter text. | | **Affiliation** | Click or tap here to enter text. |
| **Electronic Signature of Nominated Principal Applicant** | | | | **Date (ddmmmyyyy)** |
|  | | | | Click or tap here to enter text. |

| **Research Security** | |
| --- | --- |
| In compliance with the [National Security Guidelines for Research Partnerships](https://science.gc.ca/site/science/en/safeguarding-your-research/guidelines-and-tools-implement-research-security/national-security-guidelines-research-partnerships) from the Government of Canada, Praxis cannot support with federal funds any grant application that involve research in the [sensitive technology research area](https://science.gc.ca/site/science/en/safeguarding-your-research/guidelines-and-tools-implement-research-security/sensitive-technology-research-and-affiliations-concern/sensitive-technology-research-areas) if any of the researchers working on a project are affiliated with any of the organizations from any [Named Research Organizations](https://science.gc.ca/site/science/en/safeguarding-your-research/guidelines-and-tools-implement-research-security/sensitive-technology-research-and-affiliations-concern/named-research-organizations). | |
| Does your grant application involve advancing a [sensitive technology research area](https://science.gc.ca/site/science/en/safeguarding-your-research/guidelines-and-tools-implement-research-security/sensitive-technology-research-and-affiliations-concern/sensitive-technology-research-areas)? | Yes  No |
| If yes, please identify the specific sensitive technology research area. | Click or tap here to enter text. |
| Are you, or do you collaborate with researchers, affiliated with or in receipt of funding or in-kind support from any [Named Research Organizations](https://science.gc.ca/site/science/en/safeguarding-your-research/guidelines-and-tools-implement-research-security/sensitive-technology-research-and-affiliations-concern/named-research-organizations)? | Yes  No |

# Project Lay Summary

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| **Project Lay Summary** **for Praxis Website** (up to 100 words) |
| Click or tap here to enter text. |

# Project Team Composition (Members and External Partners)

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| --- | --- | --- | --- |
| **Name (First and Last)** | **Title and Affiliation** | **Role in the Project** | **Team Member or External Partner** |
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# Proposal (4-pages max)

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| **Background** |
| Click or tap here to enter text. |
| **Objectives** |
| Click or tap here to enter text. |
| **Activities and Knowledge Translation** |
| Click or tap here to enter text. |
| **Expected Outcomes** |
| Click or tap here to enter text. |
| **Operational Readiness** |
| Click or tap here to enter text. |
| **Partner Engagement** |
| Click or tap here to enter text. |
| **Equity, Diversity & Inclusion and Indigenous Engagement** |
| Click or tap here to enter text. |

# Table of Milestones, Deliverables, and Timeline

|  |  |  |
| --- | --- | --- |
| **Milestones and Deliverables** | **Performance Targets** | **Target Due Date** |
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# Budget

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| **Budget for Jan 1, 2025 - Mar 31, 2026** | | | |
| **Expense Name** | **Description** | **Praxis Budget\*** | **Other Funding / In-kind** |
| **Salaries, wages & benefits** | *Required to include name of team member/position, % FTE supported with Praxis funds. Recommended to include salary and benefit rate details to support review and approval.*  Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **Consulting & professional fees** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **Conferences & event fees** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **Travel & accommodations** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **Supplies** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **Printing & copying** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **Postage & shipping** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **Other** | *Required to specify*  Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
|  | **Sub-total** | Click or tap here to enter text. | Click or tap here to enter text. |
|  | **TOTAL** | Click or tap here to enter text. | |

*\*Praxis funds cannot be utilized for any overhead or indirect costs, as per Praxis’ policies and funder requirements.*