**1: Facesheet**

|  |  |
| --- | --- |
| Name of applicant:  Signature: Date: | |
| Mailing Address: | Telephone #:  FAX #:  e-mail: |
| Supervisor/Mentor’s full name (if applicable    Signature: Date: | |
| Please indicate which of the following documents are required for this project (check all that apply):   Human ethics approval  Consent forms  Explanatory notes to subjects   Animal care approval  Laboratory biosafety approval | |
| Title of research: | |

**2. Project Summary Sheet**

Project Summary: Outline the proposal in the space below; state the objective of the project, and sketch the methods to be used. Do not use another sheet for the project summary.

## .

Relevance Statement: Please include a statement about the mental health relevance of your proposal; show the pertinence of the project to the mandate of the Developmental Disabilities Program

**3: Project Description**

**4. Budget Sheet: Research Grant**

Name of principal investigator:

|  |  |
| --- | --- |
| **Personnel**  Specify role | **Amount** |
|  |  |
| **Total for Personnel:** |  |
| **Equipment** |  |
| **Total for Equipment:** |  |
| **Supplies and Material** |  |
| **Total for Supplies & Material:** |  |
| **Other Expenses**  Please specify: |  |
| **Total for Other Expenses:** |  |
| **Total Budget** |  |

**5. Statement by Applicant**

**6. Applicant’s biographical sketch**

**6. Supervisor’s biographical sketch**