

**RESEARCH GRANTS**

**Application for Research Grants General Information and Instructions**

The objectives of Beta Zeta at-Large Chapter Research Awards are to encourage nursing research and to advance nursing science by providing financial assistance for the conduct of research. Research grants are for one (1) year. Grants range in amount from $500 - $5,000 (depending on the number and quality of grants submitted). Grants are awarded once a year on a competitive basis to researchers.

Applications are due: April 30, 2025

**Eligibility Criteria**

Eligible applicants must fulfill one of the following requirements:

1. Student is enrolled in a higher degree program with direct supervision of a qualified researcher. (Applicant submits supervisor's CV).
2. Terminal degree (PhD, DNP, DNSc, EdD)/Formal education or preparation in the conduct of nursing research. (i.e. coursework in conducting research.)
3. The research must show potential for having relevance for nursing practice, education or research.

*Preferences will be given to active Beta Zeta at-Large Chapter members.*

**Requirements for Submission**

1. Applicants must submit the application form, research proposal, and grant agreement form to the Beta Zeta at Large Awards Committee Chairperson at [betazetagrants1@gmail.com](mailto:betazetagrants1@gmail.com) or [maryannhogan@nursing.umass.edu](mailto:maryannhogan@nursing.umass.edu)
2. Application deadline: April 30, 2025
3. Applications must be typed, single spaced.

**Research Proposal Guidelines**

Title and Abstract

A title page and brief abstract are to accompany the proposal. The abstract should include the purpose, research/PICOT questions and/or hypotheses, the sample description, the design, measurement and the analysis plan.

Proposal Outline

The following areas are to be included in the proposal. Parts 1 and 2 should not exceed **5** single spaced, typewritten pages.

Part 1. THE PROBLEM

a. Statement of the problem

b. Literature Review

c. Theoretical/Evidence-Based Practice Framework

d. Hypotheses/research questions/PICOT question

e. Significance to nursing science

Part 2. METHODOLOGY

a. Design

b. Sample criteria, size (with justification), and sampling procedure

c. Measurement of variables

d. Data collection procedure

e. Description of analysis

f. Proposed timetable

g. You do not need human subject’s (IRB) approval before submitting the proposal but

you do need to have IRB approval/waiver letter before funds are awarded.

Part 3. BUDGET

a. Itemize and justify the amount requested

1. Support may be granted for the following items:

* Personnel
* Equipment
* Supplies
* Miscellaneous

2. Funds will not usually be provided for:

* Compensation for investigator(s)
* Travel to meetings
* Preparation of manuscripts, slides, posters
* Educational expenses

Part 4. REFERENCE LIST AND APPENDIXES

a. Reference List

b. Letters, forms and instruments (if available)

c. Investigator(s) curriculum vitae

**Award Criteria:**

The Awards Committee will receive and evaluate applications and make recommendations to the Beta Zeta at-Large Chapter Board of Directors for approval.

Proposals will be judged on the basis of the following criteria:

1. Scientific merit

2. Expectation of the research for making a significant contribution to nursing

3. Qualifications of the investigator(s)

For successful applications, the grant awardee(s )will then be asked to submit a curriculum vitae (CV) for chapter records.



Sigma Theta Tau International, Inc.

RESEARCH GRANT APPLICATION FORM

1. Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Title of Research: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Name of Principal Investigator:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_

Phones: (Cell) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Registered Nurse in state(s) of: \_\_\_\_\_\_\_\_\_\_ License #: \_\_\_\_\_\_\_\_\_\_

a. Beta Zeta Chapter at-Large member ☐ yes ☐ no

b. Current dues paid ☐ yes ☐ no

5. Previous Sigma Theta Tau Research Awards: None ☐

Chapter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ National: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Other sources of research support obtained or pending for the proposed project.

List funding agency and amount of award support.

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7. Human Subjects review?\* ☐ yes ☐ no ☐waived

Consent form included in proposal: ☐ yes ☐ no

Agency granting Human Subjects approval/waiver

: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Co-Investigators: (If yes, CV attached) ☐ yes ☐ no

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. Is the research a requirement for the attainment of a degree? ☐ yes ☐ no

If yes, Doctoral proposal defense date (if applicable). \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Attach letter of support from faculty advisor. It is recommended that the faculty advisor review the proposal prior to submission.*

10. Total amount of budget requested in U.S. dollars: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

11. Please check the materials accompanying this application.

☐ Research Grant Agreement

☐ Proposal

Include the following sections:

Part 1 Problem ☐

Part 2 Methods ☐

Part 3 Budget ☐

Part 4 References & Appendices ☐

\**All studies must have approval from an appropriate human subjects committee.*

Detailed Budget

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| A. Personnel | | | | | | |
| Name | Position | Title | %Time | Salary | Benefits | Total |
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| B. Equipment (Itemize) | | | | | | |
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| TOTAL….. | | | | | | |
| C. Supplies (Itemize) | | | | | | |
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| D. Miscellaneous | | | | | | |
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Budget Justification

For each item listed in the budget, a precise justification is needed. Without justification, an item cannot be included in the budget.

**Submit application electronically to:**

[maryannhogan@nursing.umass.edu](mailto:maryannhogan@nursing.umass.edu) PhD, RN, CNE

Chairperson, Awards Committee, Beta Zeta at-Large Chapter

[Betazetagrants1@gmail.com](mailto:Betazetagrants1@gmail.com)



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**RESEARCH GRANT AGREEMENT**

If my proposal is approved for funding, I agree to:

1. Accept responsibility for the scientific conduct of this study.

2. Expend the funds as described in the proposal, and return unused funds to the treasurer of Beta Zeta at Large Chapter

3. Submit a progress and budget report at the end of each year after receipt of the award.

4. Submit an abstract as a final report.

5. Acknowledge the grant support of Beta Zeta at Large Chapter of Sigma Theta Tau in the publication or presentation of the research findings.

6. Present the findings of the research at the annual Scholarship Day sponsored by

Beta Zeta at Large Chapter.

Title of Study: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Date Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal Investigator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Co-Investigator Signature(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Expected Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ Expected Completion Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_