

**TEXAS ACADEMY OF FAMILY PHYSICIANS FOUNDATION**  
**Application for Research Project Grant**  
**Information Sheet**

The purpose of the TAFPF Research Grant Program is to support research of benefit to Family Medicine. To be eligible to receive a TAFPF Research Grant, the principal investigator must be a family physician in Texas or plan to conduct the research in Texas at one of the following locations:

Family Medicine Residency Program  
Department of Family Medicine  
Family Medicine organization or association  
Family Medicine office

**PROCEDURE**

The grant application must be completed and submitted electronically in the format described in the outline of the Application for Research Project Grant. Applications not submitted in the proper format or lacking the required signatures will be returned. In addition, the Foundation only funds research that has not been completed at the time of submission; we do not fund research retroactively. Educational presentations with pre and post evaluations are not considered research.

Prior to the semi-annual meeting of the TAFPF Research Grants Committee, the application will be sent to each member of the committee for review. A decision concerning the application will be rendered at the committee meeting.

The application will be reviewed based upon the following criteria:

Relevance to Family Medicine  
Quality of the Study Design  
Appropriateness of Data Analysis  
Cost vs. Benefit to Family Medicine

If the application is part of a matching funds grant, the TAFPF application should include a copy of the grant application to the other granting agency as well as a copy of the award notice from the other agency.

**FUNDING INFORMATION**

Due to the limitation of funds available, the Foundation can only fund one active study for any particular principal investigator at a time. Most research-related expenses are allowable if properly justified. **However, no support is allowed for expenses incurred in the presentation of study results or for computer equipment.** In addition, TAFPF funding can only be used to support the direct costs of the research. TAFPF funds cannot be used for indirect costs. Re-budgeting of funds is allowable with the approval of the Research Grants Committee.

Funding is limited to one (1) year only. The maximum amount awarded will not exceed \$10,000. If Institutional Review Board (IRB) approval was not obtained prior to the submission of the application, grant funds will not be released until notification of the IRB

approval is received by the TAFPF. However, receipt of IRB approval is not necessary prior to grant submission.

## INVESTIGATOR RESPONSIBILITIES

In addition to his/her responsibility to conduct the project as described in the application, the investigator is responsible for the accuracy of the data and any reports resulting from the research. The investigator is also responsible for how the funds are actually used and for meeting all TAFPF requirements. In addition, the investigator must:

1. Provide the Research Grant Committee with a status report March 1 and October 1 of each year that the project is active indicating the current status of the project and any changes in procedure or timetable anticipated.
2. Acknowledge the TAFPF grant support in the final report and any resulting publications.
3. Reimburse the TAFPF for any funds not used for the project.
4. Reimburse the TAFPF in the amount of the grant if the project leads to the development of a marketable product which renders profit. If profit totals less than the amount of the grant, the investigator will reimburse the total amount of the profits.
5. Provide a 1-page executive summary report or abstract for publication in the TAFP's magazine, *Texas Family Physician*, at the completion of the project. This is a technical report for the Academy's newsletter and should not compromise your ability to publish in a medical journal.

## DEADLINES

<u>Application</u>	<u>Funding Begins</u>	<u>First Report</u>	<u>Second Report</u>
March 1	May 1	October 1	March 1
October 1	December 1	March 1	October 1

## SUBMISSION

Submit all materials electronically to the following address:

**Texas Academy of Family Physicians Foundation**  
**Research Grants Committee**  
**12012 Technology Blvd, Suite 200**  
**Austin, TX 78727**  
**(512) 329-8666**  
**Fax: (512) 329-8237 email:**  
**[kmccarthy@tafp.org](mailto:kmccarthy@tafp.org)**

**TEXAS ACADEMY OF FAMILY PHYSICIANS FOUNDATION**  
**Application for Research Project Grant**

**A. PROJECT TITLE**

List the complete title of the project.

**B. PRINCIPAL INVESTIGATOR**

List the name, title, address, e-mail address and telephone number of the person charged with oversight of the proposed project, and any co-investigators.

**C. HUMAN SUBJECTS**

If activities involving human subjects are not planned at any time during the proposed study period, check the space marked "NO." If activities involving human subjects, whether or not exempt from regulations, are planned at any time during the proposed study period, check the space marked "YES." If the activities are designated to be exempt from regulation, insert the exemption number(s) corresponding to one or more of the six exemption categories listed on the description of human subjects regulations in PHS document #398.

\_\_\_ NO \_\_\_ YES → (if "YES") Exemption #'s \_\_\_\_\_  
or  
IRB approval date: \_\_\_\_\_

Assurance of compliance# \_\_\_\_\_

**D. OUTLINE OF SCHEDULE FOR IMPLEMENTATION OF PROJECT**

List timetable for accomplishing specific objectives. State proposed start and finish dates. Explain the anticipated duration of the project. In the case of long-term or continued efforts, explain how the project would continue after grant monies expire.

**E. TOTAL COST OF PROJECT/AMOUNT OF GRANT REQUESTED**

List the total estimated cost of the project and the total grant amount requested.

**F. DETAILED BUDGET**

List breakdown of project costs and separately list amounts to be contributed by other funding sources. Budget should list expenses as follows:

- |                |                  |
|----------------|------------------|
| 1. Personnel   | 4. Equipment     |
| 2. Consultants | 5. Supplies      |
| 3. Travel      | 6. Miscellaneous |

**Each item must be justified** (How did you arrive at each figure?).

**G. Abstract.**

- Study Purpose:
- Study Design (eg survey, cohort, randomized clinical trial):
- Subjects and Setting:
- Intervention (if any):
- Outcome Measures:

## **H. APPLICATION ORGANIZATION/AFFILIATION**

In addition to listing the complete name of the organization and address, applicants must list the name, title and telephone number of the organization's director (i.e. Board President, Executive Director, Department Chairman, etc.).

## **I. NAME, TITLE AND SIGNATURE**

Provide names, titles and original signatures of individuals authorized to commit the organization and study site to participation in the project and agreeing to award conditions if grant is approved.

## **J. STUDY DESCRIPTION (Should Not Exceed Ten Total Pages)**

### **1. Statement of Purpose/Goals/Objectives/Needs Assessment**

Define the purpose of the project, specific goals and objectives that will measure the project's success, and an explanation of the needs of problems it is intended to address. Substantiate needs with documentation, via letters of need, references, etc.

### **2. Description of Related Work by Others or Yourself**

Explain how the project will expand or complement the efforts of others or yourself to solve the problem or meet previously stated needs. Include relevant unpublished pilot studies you have completed.

### **3. Experimental Design and Methods**

Outline the experimental design and the procedures to be used to accomplish the goals of the project. Include the means by which data will be collected, analyzed, and interpreted. If human subjects are to be used, specify the target population, how subjects will be selected, whether Spanish-speaking subjects will be included and the anticipated sample size. Explain how effectiveness of the project will be measured. What criteria or indicators will be used in this evaluation? What specific results are expected?

### **4. Analysis**

Justify the sample size chosen and describe your plan for analyzing results.

### **5. Study Site and Resources**

Describe the study site to be used and the necessary resources you have to complete the study.

### **6. Instruments to be Used**

Attach a copy of the instruments to be used to the proposal.

## **K. BENEFITS OF THE PROJECTS (One Paragraph is Recommended)**

Explain who will benefit from the project. How will results of this project be communicated to those that will benefit from it.

## **L. REFERENCE CITED**

## **M. APPENDIX (if applicable)**

Include supporting letters, documents, resumes, references, Institutional Review Board approval, informed consent form (if applicable), and survey instruments.