

Community Health Nurses' Initiatives Group (CHNIG) Research Award 2019

Deadline

The deadline for all supporting documents is March 1, 2019 by 5PM.

The successful recipient will be announced and presented with a \$1000.00 award at the CHNIG Annual General Meeting. Applicants will be notified March 25, 2019.

Eligibility

This award will be given to a community health nurse who demonstrates excellence and dedication to the pursuit of research as part of their education (MSc and PhD), or research in community health nursing practice.

The nominee must be:

- A registered nurse in good standing with the College of Nurses of Ontario
- A member of the Community Health Nurses Initiatives Group (CHNIG) for a minimum of three years. A confirmation letter or e-mail to establish membership in CHNIG is required.
- The principle investigator on the project and will provide a welldefined research project pertinent to community health nursing.

Application Process

The following documents are required:

- Confirmation letter from RNAO of CHNIG membership: minimum of three years
- The nominee's curriculum vitae (CV): Please see guidelines below*
- A one-page summary of biographical information
- Two reference letters from individuals at separate organizations (employment or association). The references should be able to evaluate your commitment to community health nursing through professional development or advanced education relevant to community health nursing
- A research proposal following the guidelines below**

Applications should be emailed to:

ResearchEducationPD@CHNIG.org



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*CV Format - 3 Page Limit

- Professional Work (including community health experience) and Educational Background
- Formal and informal community-based activities that may include but are
 not limited to: professional development, leading workshops through work
 or an association, volunteer activities such as community health nurse
 conference planning or abstract reviewing, participation in projects or
 reports, collaboration on research, or any contributions to community
 health nursing
- Professional Memberships

**Research Proposal - Submit one copy

A description of research is required, along with its importance to community health nursing in Ontario. Your proposal should include the following:

- **Title page:** Please include title and names of all investigators
- **Abstract:** Format includes Background, Objectives, Methods, and Significance (maximum 250 words)
- Research Study: (Maximum of 5 pages, double-spaced) Please include:
 - Purpose of study
 - Research question (and/or hypotheses) and objective (s):
 Consistent with stated purpose or theoretical framework
 - Conceptual or theoretical framework (if applicable): include philosophical orientation; link to stated purpose and research question
 - o Literature review synthesis: To support research or inquiry
 - Methods: Design, sample, inclusion and exclusion criteria, data collection and procedures, data analysis
 - Significance of study: Importance of research to community or public health nursing practice, education, policy, or administration
 - Ethics approval and justification: Provide detail if required or if it will be obtained
- **Budget:** Details of how monies will be used to complete the study in total with justification for all expenditures. If this money is to be used with other funds as part of a larger budget, specify how the money for the award will be used.
- Reference list
- **Appendices:** May be used for additional forms (i.e. data collection)

Please use APA 6th Edition formatting: Double space, TNR 12" font, double space, and 1-inch margins.



CHNIG Research Award 2019 APPLICATION FORM

Full Name:		
Mailing Address:		
City, Postal Code		
Phone (Work):		
Phone (Cell):		
Email:		
CNO registration #:		
RNAO registration #:		
Number of years as CHNIG Member:		
Employer:		
If student, program in which enrolled:		
Expected completion date:		
Faculty Advisor:		
Information about Research Project: Title:		
Name of co-investigators:		
Position of co-investigators: Start date:		
Ethics Approval obtained: No Yes Have you received funds from other sources for this research project? No Yes If yes, please specify name (s) of granting source, and amount received:		
Grant:	\$	
Have you applied for other sources of funding for this research project? No \Box Yes \Box		
If yes, please specify name(s) of grant	ing source, and amount received:	
Grant:	\$	



CHNIG Research Award 2019 APPLICATION FORM

Checklist of documents attached:			
 Confirmation letter or proof of RNA Nominee's CV One-page summary of biographica Two letters of reference Research proposal (all accompany) 	I information		
APPLICATION VERIFICATION The information I have provided is accurate.			
Signature of applicant: Date of submission:			

ATTENTION: The applicant is responsible for ensuring that all supporting documents are received by the deadline date and time to the email listed above. Incomplete or late applications will not be reviewed in this competition.