

CIHR h G O #
Notice of Intention to Apply / Request for Internal Review

Please submit the completed form to grant.review@usask.ca if you intend on applying to the 2017 CIHR Project Grant Spring Competition.

Date:

Name:

College:

Department:

Email:

Phone:

ADR/ Vice-Dean/ Director:

Research Facilitator (if applicable):

Type of Application (check one)

New application

Resubmission

Type of Research (check one)

Basic health research

Clinical/health systems/population health research

Project Title:

Keywords that best describe your proposed research:

Internal Review:

I would like my application to be peer reviewed

Note: You will be asked to suggest your reviewers later in this form.

To assist you with preparing your application, cross-campus workshops may be offered. To improve the planning and organization of these workshops, please answer the following questions:

1. What areas would you like future workshop to focus on? (check all that apply)

Program Guidelines

Panel Q&A

Adjudication Criteria

Enhancing Grantsmanship (e.g. literature and theory; clarity of objectives and connection to methods; creativity)

Budgets

CCV

Other:

2. In 2015, a [Grants Repository](#) was created containing examples of successful Tri-Agency grants. If your application was successful, would you consider sharing it on the grants repository?

Yes

No

Please suggest **up to 3 UofS researchers** who would be able to provide a review without conflict of interest. You may also suggest expert reviewers in your discipline who are external to the UofS.

1. Name/Department:

Email:

2. Name/Department:

Email:

3. Name/Department:

Email:

One-Page Summary of Proposed Research: