

FAHS-BECK FUND FOR RESEARCH AND EXPERIMENTATION
A Fund Established with The New York Community Trust

FACULTY/POST-DOCTORAL RESEARCH GRANT PROGRAM

Application Form

Part 1: Project and Project Applicant Organization

Title of Project: _____

Amount Requested: \$ _____ Proposed Duration of Project: _____

Applicant Organization: *(Note: Only accredited educational and non-profit organizations may apply.)*

Address: _____

The Applicant Organization is a:

_____ College/University

_____ Non-Profit Human Service Organization

_____ Other Non-Profit Organization (Describe: _____)

Tax Exempt Number: _____

Is applicant organization subject to accreditation or certification? ____Yes ____No

If "Yes," indicate by which organization(s):

If "Yes," are the accreditations/certifications in order and in effect? ____Yes ____No

Part 2: Principal Investigator

Name: _____

Title: _____

Employer: _____

Address: _____

E-mail: _____ Telephone: _____

Nature of doctoral degree (e.g. PhD, DSW, ED), field, date received and granting institution:

Have you previously received a Fahs-Beck Dissertation Research Grant?

Yes No

Have you previously received a Fahs-Beck Faculty/Post-Doctoral Research Grant?

Yes No

If yes, indicate title of project and year: _____

Part 3: Service Component of Project

Is there a service component to the project? Yes No (If "No," skip to Part 4)

If "Yes," is it being provided by the applicant organization? Yes No

If "No," what organization is providing it?

Organization Name: _____

Address: _____

Name of Person Directing Service Component: _____

Title: _____

E-mail: _____ Telephone: _____

Part 4: Administrative Manager of Project (*must be an employee of the applicant organization*)

Name: _____

Title: _____

Employer: _____

Address: _____

E-mail: _____ Telephone: _____

Part 5: Signatures

Signing this application form indicates acceptance of the provisions of the grant as set forth in the Application Guidelines and affirms the accuracy of the information provided on the application.

Signature of Principal Investigator: _____ Date: _____

Signature of Administrative Manager: _____ Date: _____

If the grant is approved, how should the check be made out and to whom should it be sent?

Payee: _____

Send to: _____

Address: _____

How did you hear about the Fahs-Beck Fund's Faculty/Post-Doctoral Grant Program?
(Select all that apply.)

- Internet search
- Colleague
- Professional association: _____
- Received a Fahs-Beck Grant: Doctoral Dissertation Grant
 Faculty/Post-Doctoral Research Grant
- Other: _____

Part 6: Application Checklist

(Check box to indicate completion or inclusion of item in package)

- PDF of project description (maximum 10 pages, double spaced) sent as an email attachment to postdoc@fahsbeckfund.org

For items below, check only those included in package:

- Application form (2 copies)
- Project Summary with Cover Sheet (10 copies)
- Printed copy of project description
- Copies of measures to be used
- Documentation of official final IRB approval
- Letters of agreement from organizations providing services or access to subjects
- Curriculum vitae of Principal Investigator and other relevant project personnel
- Chart of tasks and subtasks, indication of responsible parties, and timeline
- Detailed budget and brief budget narrative
- Letter from institution regarding administrative costs, if any (maximum 10%)
- Letter from institution indicating accreditation and tax status

Mail application package to:

Fahs-Beck Fund for Research and Experimentation
c/o The New York Community Trust
909 Third Avenue, 22nd Floor
New York, NY 10022

IMPORTANT: Be certain to retain a copy of the completed application form and all supporting documents

FRG#: _____

REVIEWER: _____
(OFFICE USE ONLY)

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Project Summary Cover Sheet

A copy of this completed application form must be stapled to each of the 10 copies of the project summary.

Applicant Name: _____

University/Employer: _____

Department: _____

Project Title: _____

Amount Requested: \$ _____

Type of Data: Qualitative
 Quantitative
 Combination

Type of Design: Experimental
 Quasi-Experimental
 Non-Experimental

Origin of Study: Original study
 Part of a larger study
 Secondary data analysis

Sample Size: _____