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| E:\دانشگاه\MUI Logo.jpg | Isfahan University of Medical Sciences  Vice Chancellor for Research and Technology  **Research Grant Application Form[[1]](#footnote-1)**  (EFP-01) |  |

1. **Application Summery**

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| --- | --- | --- | --- |
| Electronic Submission Code | | | |
|  | | | |
| Principle investigator | | | |
| (Name, Department) | | | |
| Co-investigators | | | |
| Name, Name, Name, … | | | |
| Project title | | | |
|  | | | |
| Abstract max. 300 words | | | |
| A brief description of the project aims, justification, strategy, and expected outcomes | | | |
| Total requested budget (Rls) |  | Expected time (months) |  |

1. **Research Proposal**

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| --- |
| Specific Aims: |
|  |
| Background and Justification (max 1000 words) |
| Background, significance, and Innovation |
| Research Strategy (Methods) |
|  |
| Main Expected Outputs |
|  |
| Limitations |
|  |
| Future Work |
|  |
| Potential Commercial Benefits |
| Do you anticipate that the proposed work will result in any output which can be commercialized? If yes, briefly describe any commercial opportunities |
| References (max. 50) |
|  |

1. **Ethical Issues**

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| --- |
| Animal Studies |
| If this work involves the use of laboratory animals, indicate the animal species and number required. Please describe the procedures you will consider to respect animal rights. |
| Human Tissues and Samples |
| Does this work involves the use of human tissues and samples? If yes, please describe. |
| Human Subjects |
| Does this work involves any intervention to human subjects? If yes, please describe. |
| Informed Consent |
| Is there any indication for informed consent in this study? If yes, please attach a sample. |

1. **Time Table**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | Activities | Duration of the activity (in month) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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Total (months):

1. **Financial Details** (All numbers in million Rials)

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Personnel Cost | | | | | | | |
| Name | | | Category | Hours required | | cost | |
|  | | |  |  | |  | |
|  | | |  |  | |  | |
|  | | |  |  | |  | |
| Subtotal | | |  |  | |  | |
| Equipment cost | | | | | | | |
| Equipment and Model No. | | | Manufacturer | Quantity | | cost | |
|  | | |  |  | |  | |
|  | | |  |  | |  | |
|  | | |  |  | |  | |
| Subtotal | | | | | |  | |
| Consumables cost | | | | | | | |
| Items | | | Manufacturer or Provider | Quantity | | cost | |
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|  | | |  |  | |  | |
| Subtotal | | | | | |  | |
| Travel cost | | | | | | | |
| Destinations | Transport Mode | Number of People Travelling | | | Number of trips | Cost | |
|  |  |  | | |  |  | |
|  |  |  | | |  |  | |
|  |  |  | | |  |  | |
| Subtotal | | | | | |  | |
| Publication costs (Papers, Copy, Print and etc) | | | | | | | |
| Specify | | | | | | | Cost |
| - | | | | | | |  |
| Other Costs | | | | | | | |
| Specify | | | | | | | Cost |
|  | | | | | | |  |
| Total Budget | | | | | | | |
|  | | | | | | | |
| Amount supported by other organizations | | | | | | | |
|  | | | | | | | |
| Total Requested Amount | | | | | | | |
|  | | | | | | | |

1. **Research Team**

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| --- | --- | --- |
| Principle Investigator (PI) | | |
| Name: | Academic Degree: | |
| Department: | Tel & Email: | |
| Field of Study/ Research Interests: | | |
| Briefly describe why your capabilities, training, and previous scientific activities are well-matched with your role in this project (max. 300 words): | | |
| Top publications related to this project (max. 10)  Authors (in order). Title. Publication name. Year | | Impact Factor |
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*For each of the other investigators copy and paste the table below*

|  |  |  |
| --- | --- | --- |
| Co-Principle Investigator (Co-PI)/ Co-Investigator (Co-I) | | |
| Name: | Academic Degree: | |
| University/Organization: | Current position: | |
| Field of Study/ Research Interests: | | |
| Contribution in this project: | | |
| Top publications related to this project (max. 5)  Authors (in order). Title. Publication name. Year | | Impact Factor |
|  | |  |
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I, as the principle investigator, am responsible for the content of the form and confirm that all listed Co-PIs/ Co-Is have agreed to actively contribute in this project YES □ NO □

Date:

1. Please submit the form as a Word document (not PDF). Use Times New Roman font, 12 point in size, and make both left and right margins justified. [↑](#footnote-ref-1)