AMERICAN RESPIRATORY CARE FOUNDATION

NBRC/AMP H. Frederic Helmholz, Jr., MD Educational Research Endowment Application Information and Instructions

The NBRC/AMP has provided an endowment to the American Respiratory Care Foundation (ARCF) to support up to \$5,000 annually for educational or credentialing research, a Master's thesis, or Doctoral dissertation with practical value to the respiratory care profession.

General Instructions

Submission of Application Forms

Use the attached form to apply for the NBRC/AMP H. Frederic Helmholz, Jr., MD Educational Research Endowment. Use English only and avoid jargon and unusual abbreviations. The application should be typed, single spaced and must stay within the margin limitations indicated on the form and continuation pages. Continuation pages must be 8 ½" X 11", good quality, white bond paper. Draw all graphs, diagrams, tables and charts in the body of the application; submit them in an appendix.

Email or deliver the completed and signed original and four photocopies of the application and any Appendix materials to Crystal Maldonado, ARCF Grants Coordinator, at crystal.maldonado@aarc.org.

Do not submit an incomplete application. Do not submit additional material pertinent to an application after the receipt date, unless it is requested or agreed to by prior discussion with the Chairman of the ARCF Board of Trustees.

A complete application should be submitted by June 1 for consideration of the annual award. The ARCF Board of Trustees will utilize appropriate consultants to assure a complete review of the application. Applicants will be notified by August 1 of the ARCF's decision regarding award of a grant. The grant and certificate are presented at the AARC Awards Ceremony during AARC's Annual International Congress. The ARCF will cover the travel expenses for the award recipient to attend the International Congress to receive the award.

The ARCF reserves the right to recall funds granted for a project, if they are being misused or if sufficient progress is not being made.

Progress Reports

Summary reports must be submitted periodically and must be properly identified with the title and name of the principal investigator. Publications related to the research must acknowledge the support of the ARCF; five reprints of such reports must be sent to the ARCF upon publication.

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Application for Grant from the NBRC/AMP H. Frederic Helmholz, Jr., MD Educational Research Endowment

Read Instructions Carefully

Complete this section if an individual is applying

Name
Social Security Number
Mailing Address Position Title
Position Title
Department, Service, Laboratory or Equivalent
Major Subdivision
Telephone()
Complete this section if an institution/organization is applying
Institution/Organization Name
Mailing Address
Department, Service, Laboratory or Equivalent
Telephone ()
Major Subdivision
Fiscal Officer (Name, title, address, telephone)
Official signing for Institution/Organization (Name, title, address, telephone number)
Type of Organization: □Private Nonprofit □ Public (Specify federal, state or local):
All applicants must complete the following section Human Subjects, Derived Materials or Data Involved? □ No □ Yes
Human Subjects, Derived Materials or Data Involved? □ No □ Yes
Human Subjects, Derived Materials or Data Involved? □ No □ Yes Dates of Entire Proposed Project Period From:Through:
Human Subjects, Derived Materials or Data Involved? Dates of Entire Proposed Project Period From: Through: Performance Sites (Organizations and addresses where the project will be conducted) Were any inventions conceived or reduced to practice during the course of the project? No Yes Principal Investigator/Program Director Assurance: I agree to accept responsibility for the scientific conduct of the project and to provide the required progress reports if
Human Subjects, Derived Materials or Data Involved? No Yes Dates of Entire Proposed Project Period From: Through: Through: Through: Through: Yes Performance Sites (Organizations and addresses where the project will be conducted) Were any inventions conceived or reduced to practice during the course of the project? No Yes Principal Investigator/Program Director Assurance: I agree to accept responsibility for the scientific conduct of the project and to provide the required progress reports if a grant is awarded as a result of this application.
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Human Subjects, Derived Materials or Data Involved? □ No □ Yes Dates of Entire Proposed Project Period From: