



For Internal Use
Reference #

BC Pacific Salmon Forum

PROPOSAL FOR RESEARCH FUNDING

PROPOSAL TITLE

PRIMARY CONTACT

Name:
Organization:
Mailing Address:

Telephone: **Fax:** **Email:**

FUNDING REQUESTED \$

RESEARCH PARTNERS/COLLABORATORS *(Personal Data Forms attached – expand as necessary)*

Organization	Contact Name	Phone	Email

Items to be included with Proposal for Research Funding:

1. Executive Summary – must link to purpose of funding (maximum 1 page)
2. Proposal – must include the following (maximum 4 pages single person, 6 pages collaboration)
 - a. Project description – include objectives, expected results, significance, rationale, details on activities, scientific basis and methodology
 - b. Schedule and Work Plan – schedule of all major tasks
3. Budget (template attached)
4. Personal Data Form (template attached, each research partner/collaborator to complete)

Format: 1 inch margins, single spaced, 12 pt. Times New Roman font

Submit to:

BC Pacific Salmon Forum
 Attention: Selection Committee
 L – 427 Fitzwilliam Street
 Nanaimo, BC V9R 3A9
 Email: bcpsf@pacificsalmonforum.ca
 Fax: 250.755.3037
Questions? Call 250.755.3036

FOR INTERNAL USE ONLY

Received	Code	Score	Recommended



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BUDGET FOR RESEARCH PROPOSAL

PROPOSAL TITLE

TOTAL BUDGET \$

TOTAL REQUESTED \$

BUDGET *(Expand as necessary)*

Item	Budget	Cash/In Kind Contributions*	Cash Requested	Payment Schedule
Salaries and Benefits				
Equipment and Facilities **				
Materials and Supplies				
Travel				
Other (please specify)				
TOTALS				

* **Cash and In Kind Contributions** – please list contributors with their total cash and/or in kind contributions. Also provide a summary of other sources of support and its relationship to the current proposal.

** **Substantive equipment costs must be justified**



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PERSONAL DATA FORM – RESEARCH FUNDING To be completed by each principle researcher and collaborator

PROPOSAL TITLE

Name:
Organization:
Mailing Address:

Telephone:
Fax:
Email:

ACADEMIC BACKGROUND *(Expand as necessary)*

Diploma/Degree	Discipline	Institution/Department	Location	Date

ACADEMIC, RESEARCH AND INDUSTRIAL EXPERIENCE *(Expand as necessary)*

Position	Organization/Department	Location	Month-Year

PUBLICATIONS AND OTHER EVIDENCE OF SCHOLARLY ACTIVITY *(Expand as necessary)*