Tri-Agency Catalyst Grant

Please submit the completed form to [oris@uleth.ca](mailto:oris@uleth.ca) by May 1 for consideration.   
Late submissions will not be considered.

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| **Overview** | | **For ORIS use** | |
| Applicant | Department | External application reviewed by ORIS?  Yes  No | Funding decision |
|  |  | Outstanding final report?  Yes  No |  |
| Project Title | | Previous Catalyst grant for this project?  Yes  No |
|  | | If yes, provide details: |

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| **Competition details** | | | | **Supporting Materials** |
| To which Tri-Agency competition will you be applying? | | Date of last application. | Anticipated date/competition for resubmission. | Check to confirm the following items are appended to your application: |
| CIHR Project Grant  NSERC Discovery Grant  SSHRC Insight Development Grant | SSHRC Insight Grant  SSHRC Partnership Development Grant  SSHRC Partnership Grant |  |  | unsuccessful external application  feedback and/or rankings from the selection committee/panel. |
| Please describe the review process you went through when developing the application. | | | |  |
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| **Plan to strengthen the application** | | | |
| Itemize the feedback from the application reviewers, outline how you plan to address the feedback, and provide a budget justification for any resources that you are requesting to address the feedback. | | | |
| **Feedback** | **Plan to address the feedback**  Include the timeframe for the activities to be completed. | **Budget requested ($)** | **Justification**  Briefly explain how the proposed expenditures will help address any deficiencies as noted in the external reviewer feedback.  Note: funds cannot be used to support students or trainees already employed by the applicant. |
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*Add more rows if necessary*