



Khalid Pervaiz Kakar / Fariza Begum Award

To participate in a humanitarian medical research study to assess the content validity of a new medicine or biomedical technology-related research grant.

PROPOSAL FORM

PART I. ADMINISTRATIVE INFORMATION

Please note: the completed grant application (this form and requested accompaniments) must be emailed to info@upplysningavancez.com with the subject header "**Khalid Pervaiz Kakar / Fariza Begum Award**" by **20 December 2024 by 23:59 GMT +1**. Submissions received after this date will not be accepted.

1. PRINCIPAL INVESTIGATOR

1.1. Last name:		1.2. First name:	
1.3. <input type="checkbox"/> Female <input type="checkbox"/> Male	1.4. Nationality	1.5. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Dr. <input type="checkbox"/> Professor	
1.6. Full address of the principal investigator:			
1.7. Country		1.8. Telephone (work)	
1.9. Telephone (mobile)		1.10. Email (1): Email (2):	
1.11. Have you already received any grant from Khalid Pervaiz Kakar / Fariza Begum Award? <input type="checkbox"/> Yes <input type="checkbox"/> No		1.12. If so, please indicate what was the most recent grant: Grant identification number: Dates of grant:	

2. PROJECT

2.1. Protocol adaptation summary : <i>(do not exceed 250 words)</i>	
2.2. Proposed starting date	2.3. Proposed end date:



2.4. Acceptance of general conditions by the Principal Investigator

I have read the conditions stated in the accompanying call and present form; if my application is accepted, I agree to abide by them.

Signature of the Principal Investigator:

Date:

3. BENEFICIARY INSTITUTION

3.1. Full name of institution:

Administrative authority: *(Finance officer, Bursar)*

Last name:

First name:

3.2 Address:

3.3. Country:

3.4. Telephone:

3.5. Email (1):

Email (2) or institutional website:

3.6. Type of organization

Research institution Public health institute University Company

other (specify):

3.7. Legal status: Private Public other (specify):

3.8. Declaration of institutional endorsement

I confirm that I have read this application and that, if support is granted, the work will be in accordance with the general conditions. I also confirm that the staff gradings and salaries shown in the attached budget are correct and in accordance with the normal practice of the institution.

Signature:

Date:

Full name:

Title:



PART II. PROJECT DESCRIPTION (3 pages *maximum* for items 1-7)

1. Completed protocol

Please request the draft core protocol by email to Prof Dr Mehdi Khan mehdi@upplysningavancez.com with the subject header “Khalid Pervaiz Kakar / Fariza Begum Award”

I have added the requested details about my proposed study site to the protocol and am submitting it with my application

Yes No

2. I am applying for a research grant of up to USD \$5,000

Yes No

3. Institutional and national ethical clearance and approvals

Indicate from where you will obtain local ethics clearance



4. Project Team

List the names of the team that will be participating in this research project. Please also include the level of involvement in the project by completing the **Time (%)** column. **Please attach a brief curriculum vitae (CV) of no more than 2 pages (excluding publications) of all researchers involved in the project.**

First name and Last name	Sex (M / F)	Name of the institution	Position/role in the institution	Role in the project	Time (%)



5. Essential/Desirable skills

Please briefly summarize how the team is proficient in the essential skills (strong skills in English and the language in which research will be conducted; qualitative research experience, comfort with research on biomedical technology) and [if applicable] desirable skills (previous experience with cognitive interviewing and/or translating or localizing survey modules).



PART III. PROJECT LINKAGES, TRAINING OPPORTUNITIES AND RESOURCE MOBILIZATION

1. Collaboration with other research/academic institutions

Describe collaborations with other research/academic institutions for the implementation of the research project. If applicable, please attach letters of agreement from the mentioned institution(s).

2. Links with other research projects (if applicable)

Please describe other current research projects being led by your institution or collaborating institutions that are linked to the one you are proposing with this call and how you intend to link with it as well as how this proposal strengthens or complements the existing one.

If not applicable, please indicate with N/A.

3. Leverage funding (if applicable)

If applicable, please list other funds that will be used to leverage the costs of the existing project proposal. These could be funds that are covering for researcher's time or for additional components of the project not being funded by this grant. Briefly describe each of the contributions and record an estimate figure in the table, briefly explaining the method used to calculate it. This will help us to know the sustainability of the project.

Name of funder	Type of contribution



PART IV. BUDGET

If you responded 'yes' to Part II Answer 2 (you wish to be considered for a small grant), please complete Part IV. If you do not wish to be considered for a small grant, please continue to Part V.

1. Overall project budget <i>Please complete each line item, as applicable.</i>	
Budget item	Proposed budget (USD)
1. Personnel (Last name, First name, and role in the project. Add as many rows as needed)	% time
1-	
2-	
3-	
Subtotal of personnel	0
2. Services and supplies Printing and stationary supplies Accounting services Computer/internet suppliers Software/licenses Data entry/transcription services Data analysis support Other supplies (please specify)	
3. Participant costs	
4. Local travel and field work (names of travelers, destination and purpose, accommodation and transportation cost, per diem)	
5. Other costs (please specify)	0
1-	
2-	
3-	
Subtotal other costs	0
Total (USD)	0
Chief Financial Officer of the institution (full name)	Principal Investigator (full name)
Signature _____ Date _____	Signature _____ Date _____



Budget justification	Proposed budget (USD)
<p>The budget should clearly reflect the planned activities and the costs required to implement them. Include a justification for each budget line stating how the costs were estimated and how they relate to the activities presented in the proposal.</p>	
1. Personnel	
2. Services and supplies	
3. Participant costs	
4. Local travel and field work	
5. Other costs	



GANTT chart												
Activities	Project timeline											
	(Year)											
	(Month)											
Local ethics committee review												
Investigators coordination meeting												
Questionnaire development												
Training on participant recruitment												
Training on informed consent process												
Training on administering questionnaire												
Recruitment												
Data collection												
Data Management												
Data analysis												
Writing interim project report/manuscript												
Writing final project reports/manuscript												
Final project review process												
Dissemination of project outcomes												

PART V. PROJECT Timeline

Please color the boxes according to the month in which you expect to complete said activity and adapt the headings to match your project plan. Add any necessary rows (these are just examples)



PART VI. LIST OF APPENDICES [IF REQUIRED]

Should you have any appendices to this application, please list them here and include a title to ensure that the entire application is kept together. **Please do not attach reports of publications and try to keep the number of appendices to a minimum.**

Number	Title