



**Society of Urologic Nurses and Associates
Experienced Investigators Program**

Application for Clinical Research Support

Date: _____

Name: _____

Address: _____

Phone #: _____

Fax #: _____

E-mail URL: _____

SUNA Membership #: _____

Preferred contact route: _____

I am aware that acceptance of this research scholarship includes the following commitments: sharing results via podium presentation at a future SUNA meeting, submitting the study and results for publication in UNJ with acknowledgement for SUNA's support.

My signature also signifies that there is no conflict of interest or attachment of this research with personal gain from any commercial product associated with this research project.

Signature & date _____

Title of Research Project: _____

Research Project Abstract:

(Brief summary of research focus/objective, targeted participants, and research methods/data collection approaches to be used; 300 word limit.)

Society of Urologic Nurses and Associates Experienced Investigators Program

Application for Clinical Research Support

Directions related to the application process

1. Identify a clinical practice issue or concern which warrants research investigation. Develop a preliminary research study proposal. Set default drivers to standard margins (1 or 1.5 inch all around), double space text, easy to read font type (not script), font size of 10 or 11, and logical pagination.
2. Complete the Application for Clinical Research Support cover sheet.
3. Complete the Brief Proposal Description section using the directions provided. Submit this section in an anonymous format; identify pages with only a running head of no more than 5 key words (i.e., "A research study exploring the urinary infection following with renal stenosis" would have a running head of "stenosis & infection").
4. Complete an Investigator Biographical Sketch for each person significantly involved in the conduct of the research. Sketches are not required for data collection assistants if their involvement is limited to data collection only.
5. Submit the materials as one unit to the SUNA National Office, East Holly Avenue, Box 56, Pitman, NJ 08071. Materials should include:
Application for Clinical Research Support,
Description of Research Project,
Investigator Biographical Sketches
Applications may be emailed as a PDF file to suna@ajj.com.
Faxed versions will **not** be accepted.
6. Applications will be reviewed for congruence with SUNA goals, scientific merit and SUNA's ability to secure adequate funding for the project. When all criteria are met, the investigator will submit a full proposal following guidelines given by the SUNA research liaison committee.

Funding

Upon acceptance of the application, funds will be released in the following manner:
25% upon receipt of the agreement; 25% upon receipt of an interim report, 25% upon receipt of final report and 25% upon presentation at a SUNA national conference and submission of the study and results for publication in UNJ.

Brief Proposal Description

Directions

Purpose of the study

In a few sentences, briefly describe the purpose of the study. May be stated as a problem statement, hypothesis or study question.

Significance of the study

Briefly describe the significance of this problem to or within urologic nursing practice. This section is limited to ½ page.

Background of the problem

What is the issue or concern to be addressed? Why is it a practice problem? How does your study contribute to what has already been done by you or others (AKA extending evidence-based practice)? This section is limited to 1 page.

Methods

Describe how you will accomplish the objectives. Include a description of the setting, criteria for subject/participant selection and sample size, and your method for subject/participant recruitment. If variables will be manipulated or measured, describe that process also. Finally, describe data collection and analysis processes. Attach a copy of the instruments that will be used in data collection. This section is limited to 3 pages.

Ethical conduction

Describe how voluntary and informed consent is assured. In what ways will anonymity and confidentiality be addressed? How will you minimize hazards, discomforts and negative effects of your research? Append the informed consent form and documentation of Institutional Review Board approval to this section of your application packet.

Study Budget

Provide a budget associated with the conduction of the study. Include supplies, equipment, special staff, salary and other expenses needed to complete the study. Justification for budget items **are required**. A project timeline must also be included.

Biographical Sketch

Name:

Professional Title:

Role in research study:

Primary investigator Associate Investigator
 Other (explain)

Academic and experiential qualifications for this study: