



## **VERHONICK CLINICAL NURSING RESEARCH AWARD SIGMA Nursing Excellence BETA KAPPA CHAPTER**

### **Purpose of the Award**

Phyllis J. Verhonick believed in the fundamental importance of clinical research in the practice of nursing. She was also committed to supporting the efforts of beginning nurse researchers. A Beta Kappa Chapter research fund was established in 1979 in Dr. Verhonick's honor. The purpose of this award is to provide a \$1,000 grant to a nurse researcher to investigate clinical nursing problems.

### **Grant Recipient Selection**

Grant recipients are selected by the Research Committee of Beta Kappa Chapter of Sigma. Recipients must be Beta Kappa members who propose a clinical nursing research study. Criteria for proposal evaluation include:

1. Scientific merit of the proposed research study
2. Relevance of the proposed research to nursing practice
3. Beta Kappa activities of the investigator(s)
4. Prior approval from appropriate human investigation or IRB committees

### **Deadline**



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Submit applications via email to Malinda Whitlow at [mlw7b@virginia.edu](mailto:mlw7b@virginia.edu).

### **Award Application:**

Name of Principal Investigator: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Institution: \_\_\_\_\_

Position: \_\_\_\_\_

(If more than one investigator, put information related to other investigators on a separate page.)

## Please submit the following information:

1. Title and abstract of proposed study (max. of 1 page)
  - a. 1 copy *with* investigator names
  - b. 1 copy *without* investigator names
2. Research Proposal (Include title of research but DO NOT include researcher names) (Max. of 5 pages) \*
  - a. Specific Aims
  - b. Background and Significance
  - c. Research Design and Methods (Sample, setting, instruments, procedures)
  - d. Plans for Data Analysis
  - e. Plans for protecting human rights of participants (i.e. consent, confidentiality and protection of data)
3. Anticipated dates of study: \_\_\_\_\_ to \_\_\_\_\_
4. Description of plans for using the award and relevance to the proposed investigation.
5. Budget itemizing all projected expenses
6. Other support
  - a. Source of other funding for which application is being made
  - b. Does this study depend upon other funding?
  - c. What will happen to study if other funding is not forthcoming?
7. Attach a biosketch for each investigator (maximum of two pages for each investigator)
8. Human Investigation Committee approval \*
  - a. If the study involves University of Virginia faculty, staff, students, and/or hospital/clinic patients, attach Human Investigations Committee approval or information that approval is pending
  - b. If the study involves non-University of Virginia human subjects, attach a letter from appropriate human investigation committee approving the proposed research

\* **Note** – Funds will not be released without proof of Human Investigation approval
9. Briefly describe your activities in the Beta Kappa Chapter and in Sigma
10. Recipients of the Phyllis J. Verhonick Clinical Research Fund Award must agree to:
  - a. present the results of the research at an appropriate Beta Kappa forum
  - b. submit an abstract of the study to the Sigma Theta Tau International research database registry
  - c. acknowledge the award in any publication of the funded research
  - d. refund any unused portion of the Phyllis J. Verhonick Research Award

Signed: \_\_\_\_\_

Date: \_\_\_\_\_