**President’s Fund Request Form**

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| **General information on organization requesting funding:** |
| 1. Name of Organization:
2. Title of proposed knowledge translation/stakeholder engagement/research activity
3. Date or timeline of activity requiring funding:

 1. Amount requested:
2. Name and contact information of the person with signing authority should funding be approved:
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| **To ensure that your application meets the evaluation criteria, please complete the information requested below, in the form provided. You may also refer to the** [**Presidents Fund**](https://cihr-irsc.gc.ca/e/43645.html) **web page for additional information.**  |
| 1. Explain how your proposal is consistent with CIHR's mandate, vision as well as the Strategic Priorities as outlined in CIHR’s Strategic Plan? (max. 1 page)
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| 1. Describe the opportunity for outreach, increased profile for the value of health research, and/or support for knowledge translation. (max. 1 page)
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| 1. Explain the national or international focus of the request. (max ½ page)
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| 1. Explain how the event/activity takes equity, diversity, and inclusion into account. (max ½ page)
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| 1. Please append a budget and ensure the following is detailed:
	* That the budget is appropriately costed for the activities proposed.
	* The request for CIHR funds does not exceed $25,000.
	* Clearly indicate what elements would be covered by CIHR (and ensure they fall within [CIHR allowable expenses)](https://www.nserc-crsng.gc.ca/InterAgency-Interorganismes/TAFA-AFTO/index_eng.asp).
	* Demonstrate additional sources of funding that will be provided in the overall budget.
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| 1. Briefly explain why this application is being submitted to the President’s Fund and not another existing funding opportunity.
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**Additional comments for the CIHR President’s Fund Evaluation Committee:**