

**MANITOBA INSTITUTE OF CHILD HEALTH  
SMALL GRANT CHECKLIST**

**See *Grants and Awards Guide* for application receipt deadline date.  
Late applications (after 3pm on deadline date) will not be accepted.  
Hard copy of Application to be submitted to MICH administration office (JBRC 513)  
AND an electronic copy sent to [lwaters@mich.ca](mailto:lwaters@mich.ca).**

**Maximum \$5000.00**

<b>Applicant Name</b>	
<b>Position, Dept &amp; Institution</b>	
<b>Project Title</b>	
<b>Phone #</b>	<b>E-mail</b>

PI is a MICH faculty member.

Proposal: typed, single-spaced, two pages.

One original hard copy plus a copy e-mailed to lwaters@mich.ca with all components as a single PDF or Microsoft Word document.

Detailed budget (Biostatistician consulting rate: \$50/h)

Relevance to Child Health is explicitly explained.

If a clinical intervention (medical device, pharmaceutical or biologic) is proposed, documentation that the product is licensed for this use or approval for investigational use has been obtained, or that a submission for approval for the proposed use has been made to Health Canada is appended.

Does budget include request for CRU support?

**SIGNATURES:**

**Principal Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*The Principal Applicant is the primary author of this proposal and is responsible for the intellectual content, budgetary management, completion of the proposed work and adherence to the policies outlined at MICH.ca*

**MICH Member Co-Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Signature by the MICH member is required when the Principal Applicant is an Allied Health member or Research Trainee. It indicates that the supervisor has reviewed the proposal and agrees with the intellectual content and feasibility (i.e. skills, time allotment) of the proposed project in the hands of the applicant.*