



## ***2017 Dissertation Research Grants Program***

### **ONLINE APPLICATION INSTRUCTIONS**

**Revised 7/1/16**

***(with new application fee payment link)***

***An Online Application system is used for  
all aspects of the application submission***

***Please see (<http://www.onsfoundation.org/apply/re/RE03>)  
for downloadable application forms.***

**Letter of Intent Due: August 15, 2016**

**Online Application Submission Due: September 15, 2016**

**ONCOLOGY NURSING SOCIETY FOUNDATION**  
**DISSERTATION RESEARCH GRANTS PROGRAM (RE03)**  
**GENERAL INSTRUCTIONS TO APPLICANTS**

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**DEADLINE DATES:**

- Letter of Intent Due: August 15, 2016
- ONLINE Grant Application Submission Due: September 15, 2016
- **ONLINE APPLICATION SUBMISSION WEBSITE:** (<http://www.onsfoundation.org/apply/re/RE03>)
- Notification of Funding: December 2016
- Funding available: January 2017

**PURPOSE OF GRANT:**

The purpose of the ONS Foundation Dissertation Research Grants Program is to support oncology nursing research for PhD/DNSc dissertations. Funding preference is given to research that addresses the ONS Research Priorities and the ONS Research Agenda.

All dissertation research grant awards are up to \$5,000. The dissertation research grants are for general investigator-initiated oncology topics.

**ELIGIBILITY:**

The principal investigator must be a registered nurse (RN) actively pursuing a career in some aspect of cancer patient care, education, or research, and be a PhD/DNSc student. Funding preference is given to projects that promote theoretically based oncology practice. Membership in ONS is not required for eligibility.

Individuals who have received previous ONS Foundation research funding and have a delinquent final report are not eligible for funding. ONS Foundation Board of Trustees are not eligible for funding.

**FUNDING PERIOD:**

The maximum funding period is for two years from the receipt of the award notification. No “no cost” extensions are permitted.

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**GENERAL INSTRUCTIONS:**

**A LETTER OF INTENT is due 1 month prior to the application submission date. For instructions and a form go to: (<http://www.onsfoundation.org/apply/re/RE03>)**

- **APPLICATION FEE:** A non-refundable fee of \$25.00 is required at the time the application is submitted. This fee is used to offset the costs of processing the applications. **The application fee is to be paid through the ONS Foundation store at (<https://www.ons.org/store/accessories/research-grant-application-fee>).** (This link is for payment of both the \$5,000 Dissertation Grant funding and the \$25,000 Research Grant funding.)
- The application fee can be paid by credit card (Visa, M/C, Amex, or Discover). Upon payment, an Order Confirmation Number will be provided. **This Confirmation Number will be requested during the online application submission process and must be entered in order to complete the submission.**
- **Receipt of the application will be confirmed via e-mail.** If no response has been received within two days after the application deadline, contact the Research Department at: Phone: **412/859-6298** or Email: [research@onsfoundation.org](mailto:research@onsfoundation.org)
- Applications that are incomplete or not prepared according to the instructions will not be reviewed.
- Review and scoring criteria can be found at <http://www.onsfoundation.org/apply/re>

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## **INSTRUCTIONS FOR COMPLETION OF THE APPLICATION:**

### **ONLINE SUBMISSION INFORMATION:**

**Enter the following information as requested in the online submission.**

- **Application Fee Confirmation Number.** A fee of \$25.00 is required at the time the application is submitted. **The application fee is to be paid through the ONS Foundation store at (<https://www.ons.org/store/accessories/research-grant-application-fee>).** (This link is for payment of both the \$5,000 Dissertation Grant funding and the \$25,000 Research Grant funding.)
  - A confirmation number will be provided to you upon payment.  
**The Confirmation Number will need to be entered as part of your online submission.**
- **Title of Project.** Limit to 100 characters.
- **Principal Investigator (PI).** Name the one individual who is primarily responsible for implementing this proposal and for reporting to the ONS Foundation. Enter your position and institutional address. Also enter the home, work and fax phone numbers. The preferred mailing address and email address will be used for all future communications.
- **Total Budget Requested (U.S. Currency).** Budget requested should not exceed \$5,000. See the section entitled “Line Item Budget and Budget Justification.”
- **Dates of Project.** The project should be confined to a maximum of two years.
- **Research on Human/Animal Subjects.** The principal investigator must obtain approval from an Institutional Review Board (IRB) or Animal Welfare Committee if the proposed project pertains to human or animal research. The IRB must be registered with the office for Human Research Protections, DHHS and the assurance identification number must be provided as instructed in the application submission process.

*IRB submission or approval is not mandatory prior to application submission. However, it is strongly recommended that you begin your IRB application submission forms immediately after submission of your ONS Foundation Research Grant application so that you are “ready to submit” if your application is funded. The two year grant timeline starts on the date of your Notification of Award and No Cost Extensions are not permitted.*

  - **NO FUNDS WILL BE RELEASED UNTIL PROOF OF IRB APPROVAL HAS BEEN RECEIVED BY THE ONS FOUNDATION.**
  - If you have received IRB approval, list the approval date and assurance identification number in the space provided in the online application and upload the approval letter.
  - For multi-institutional projects, funding will be released after receipt of the approval from the applicant’s Institutional Review Board. However, confirmation of IRB approval at all sites is required before initiating any data collection activities at each site. The PI should submit the appropriate letters of approval from all sites to the ONS Foundation, as received.
- **Research Team.** Provide the names, credentials, institutions and role on the team, i.e., co-investigator, consultant, research assistant, statistician, for all members of the research team. Please enter this information as instructed for the online submission.
- **Immediate Supervisor/Chairperson.** This should be the Principal investigator’s advisor or chair of the dissertation committee. An email or letter is needed from this person confirming approval of the proposed study by the entire dissertation committee. The names, credentials and expertise of each committee members needs to be included in the letter from the committee chair. Upload the email message or letter as instructed for the online submission.

The faculty chairperson must also complete the *Dissertation Projects* form, which can be downloaded from the forms area at the bottom of the following website

(<http://www.onsfoundation.org/apply/re/RE03>). The signed form should then be uploaded with

the application indicating that the proposal has been approved by the committee prior to the application due date.

- **Institutional Official.** This is usually the person in the organization's sponsored research office. Please include their name, credentials, address and contact information as instructed in the submission process.
  - **Acceptance of Terms and Responsibilities.** The applicant must read the research award agreement and type in their name as proof of acceptance of the terms and responsibilities included in that section of the application submission.
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**ABSTRACT:** *(To be uploaded as a PDF document)*

At the top of the abstract page, list the title of the project; name of the applicant(s); name of advisor; institutional affiliation for each person identified; and that this is a dissertation project. The body of the abstract should contain the following headings:

Purpose/Specific Aims, Rationale/ Significance of Study, Conceptual or Theoretical Framework, Main Research Variable(s), Design, Setting, Sample, Methods, and Implications for Practice. Limit the abstract to one page (500 words), using a 1 inch or ½ inch margin, and indicate the number of words in the abstract at the bottom of the page.

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**PROJECT NARRATIVE (APPROACH):** *(To be uploaded as a PDF document)*

The narrative (Purpose through Data Analysis) is **not to exceed 6 single-spaced typewritten pages using a 12-point font** (preferably Times New Roman, Arial, or Courier), **½ inch margins top/bottom, right, and a ¾ inch left margin.** The consistent use of one format (APA, AMA, etc.) for the text, citations and reference list is required. Please number all pages of the narrative.

**PRESENT THE PROJECT NARRATIVE INFORMATION IN THE FOLLOWING ORDER:**

**Purpose and Specific Aims.** Clearly state the purpose of the study and list specific aims in numerical sequence.

**Significance, Framework, and Review of Literature.**

- Explain the significance to oncology nursing. Animal studies must address how the research will contribute to the understanding of human responses and to advances in nursing science or clinical practice. Describe what will be the effect of this study on the concepts, methods, technologies, treatment, services or preventative interventions that drive oncology nursing.
- Identify and describe the conceptual or theoretical framework, including variables, for the study.
- Present a succinct, focused, and critical review and synthesis of the literature.
- Identify how the study will address a knowledge gap.

**Preliminary Work.** Describe any previous research on the topic that has been done by the PI or research team and provide preliminary findings, if any.

**Methods and Design.** Use the following subheadings:

- **Design.** Identify the research design. Indicate if the project is a pilot study. Some reasons for conducting a pilot study include:
  - To determine the feasibility of a larger study
  - To develop or refine a nursing intervention
  - To develop a protocol or set of procedures for implementing an intervention
  - To identify design and methodological problems
  - To determine if the sample is representative of a larger population or whether the sampling technique is effective

- To test the reliability and validity of instruments and refine instruments or data collection procedures
- To try out and refine data analysis techniques
- **Sample and Settings.** For qualitative and quantitative studies, describe the number and type of participants and all sampling and assignment procedures. Indicate the rationale for the sampling process and sample size determination. If a power analysis was conducted to justify the sample size, include the results of this analysis. Describe the process for recruitment of participants. Identify potential problem areas and include alternative strategies. **Provide a rationale for the use of the selected setting(s). This is especially important if the proposed study is a multi-site project.**
- **Intervention/Independent Variables.** Clearly describe the intervention, if this is an intervention study.
- **Instruments.** List and describe all instruments and include a discussion of the validity and reliability of each. If qualitative research, include information on the instrument's rigor. Describe scoring procedures. *Append a copy of all instruments and any permission letters.*
- **Data Collection Schedule and Procedures.** Describe how and when data will be collected and any procedures for standardizing data collection.
- **Data Analysis and Interpretation.** Describe the statistical or analytic techniques that will be used to answer each research question of the project.

**OTHER COMPONENTS OF THE PROPOSAL SUBMISSION PROCESS:** *(Not part of the 6-page narrative)*

**(You will be asked to provide 1-2 paragraphs addressing each of the following areas: (This information is to be uploaded in a PDF format)**

- **ONS Research Priorities and/or Research Agenda.** Describe how the project addresses the current ONS Research Priorities and/or the current ONS Research Agenda. (Both can be found on the ONS Website at: <https://www.ons.org/practice-resources/researchers>.)
- **Protection of Human Subjects or Animals Used for Research.** Describe how informed consent will be obtained and steps taken to protect participants' rights or the welfare of animals. Identify any potential risks associated with participation in the project. Include your data and safety monitoring plan.
- **Women and Minority Inclusion in Clinical Research.** The inclusion of women and minorities must be addressed in developing a research design appropriate to the scientific objectives of the study. Inclusion is required unless a clear and compelling rationale shows that inclusion is inappropriate with the respect to the health of the subjects or that inclusion is inappropriate for the purpose of the study. Provide information on the composition of the proposed study population in terms of sex/gender and racial/ethnic group and provide a rationale for selection of such subjects in terms of the scientific objectives and proposed study design. The description may include (but is not limited to) information on the population characteristics of the disease or condition under study, national and local demography, knowledge of the racial/ethnic/cultural characteristics of the population, prior experience and collaborations in recruitment and retention of the populations and subpopulations to be studied, and the plans, arrangements and letters of commitment from relevant community groups and organizations for the planned study.
- **Innovation.** Describe how the project challenges existing paradigms or clinical practice; addresses an innovative hypothesis or critical barrier to progress in the field. If applicable, describe how the project develops or employs novel concepts, approaches, methodologies, tools or technologies in the area.

- **Facilities and Resources (Environment).** Describe the facilities and resources available to carry out the project at all research sites, e.g., computers, statistical and data management support, office space, equipment, etc.
- **Implications for Practice and Research.** Describe the implications for oncology nursing practice.
  - Identify future research that may develop from this project.
  - Describe how this project will provide the groundwork for seeking additional funding in the future.
  - *Describe when and how the study findings will be disseminated.*

## **APPENDICES (Not included as part of the 6-page narrative)**

***(The following items will all need to be uploaded as separate PDF documents. Follow the online submission instructions for each area.)***

- **Reference List.** The reference list should follow the format chosen for the project narrative (APA, AMA, Chicago, etc.).
- **Timetable for Accomplishing the Work.** The timetable should reflect a realistic work schedule so the project can be completed within the funding period as no “no cost” extensions are permitted.
- **Human Protection Education** It is an expectation of the ONS Foundation that the researcher will incorporate, into the study proposal, key ethical principles and federal regulations to protect human participants or animals throughout the research process. The PI is required to include, in the appendices, a current certificate of completion from either the NIH Human Participant Protections Education for Research Course or a similar course available at a university. The NIH course is available at < <http://ohsr.od.nih.gov>>. If animal subjects are involved, documentation of animal participant protections education must be submitted. Documentation of human or animal participant protections education for all key personnel (all individuals responsible for the design and conduct of the study, including PI, co-investigators and data collectors) must be submitted after the funding notification is received. However, it is encouraged that education documentation for key personnel be submitted with the application.
- **Letters of Support.** Include letters of support from key administrators, agency personnel, and consultants, as necessary. Letters of support should document access to performance sites and research participants, institutional resources committed to the project, and matching funds, if any. Consultants should describe their role and involvement with the research project. All letters of support should be uploaded in a PDF format. The system will only allow for uploading one document. Therefore, multiple letters of support will need to be scanned into one PDF document prior to uploading.
- **Biographical Sketches. (INVESTIGATORS)** Use the new NIH OMB No. 0925-0001/0002 **biographical sketch form** or download a biosketch form from the forms area at the bottom of the following ONS Foundation website at (<http://www.onsfoundation.org/apply/re/RE03>). Submit a biosketch for the PI and any key participants, e.g., all co-investigator(s), consultant(s), clinician collaborators and mentors. *Each biosketch is limited to 5 pages. Note that the biosketch personnel statement needs to include the contributions of that person to the grant proposal.* All biosketches must be combined into one PDF and uploaded.
- **Instrument(s).** Include all instruments or interview schedules that will be used to collect data. Include any letters of permission to use a copyrighted instrument. These may be **uploaded** during the online submission process, if applicable. Multiple documents will need to be scanned into one PDF prior to uploading
- **Consent Form.** Include a copy of the consent form that will be presented to potential subjects for their signature. These may be **uploaded** during the online submission process, if applicable. Multiple documents will need to be scanned into one PDF prior to uploading

- **Miscellaneous.** Miscellaneous items include conceptual models, diagrams, a detailed description of an intervention or intricate laboratory procedure, list of performance sites, etc. These documents may be uploaded during the online submission, if applicable.
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### **BUDGET ISSUES:**

The budget should not exceed \$5,000 unless other sources of support are available. Other sources of support **MUST** be indicated to assure that funding to support the project's activities, which are in excess of the grant funding, will be met and will not hinder the completion of the project.

### **The ONS Foundation Dissertation Research Grant Does Not Fund the Following:**

- Projects that are nearly completed (if the dissertation work is 75% or more complete)
- Salary support for applicant or faculty
- Payment of tuition
- Institutional indirect costs
- Expenses incurred prior to the funding date
- Travel for conference attendance or presentation
- Printing of dissertations

**Line Item Budget.** Research project-related expenses must be itemized using the budget worksheet provided. One line item budget may be submitted for the entire project or separate budgets are permitted from each performance site. Items labeled as miscellaneous will not be funded. The line item budgets may include the following:

- **Personnel:** All research project personnel (PI and faculty salaries not permitted to be funded), consultants, & clerical support on a personnel sheet or USPHS Form 398. Include the name, position, % time devoted to project, fringe benefit percent and amount, total fringe requested, and total salary requested. If in-kind contributions of personnel are relevant, please include percentage of time and role.
- **Supplies:** Supplies are defined as items with a unit cost of \$500 or less. Examples include: photocopying, telephone, postage, computer time, paper, envelopes, transcription machines, cassette tapes, floppy disks, etc.
- **Equipment:** Equipment is defined as items with a unit cost greater than \$500.
- **Software:** Include the name, version number, and unit cost.
- **Other Expenses:** Do not list as miscellaneous. These must be listed very specifically, i.e., lab fees or supplies, lab assays, standardized testing, or reimbursement of study participants.
- **Other Support:** Identify total amount of other sources of funding for the proposed study. Specify source, amount and funding period.
- **Total Funds Requested**

**Budget Justification.** The justification is a description that includes a justification for *all itemized expenses* including personnel. Each section of the justification should: (1) list the specific items or project personnel noted below, (2) describe why the items or personnel are *essential* to the conduct of the study, and (3) include any cost calculations. The lack of institutional resources for particular items should be described.

- **Personnel.** A description of the activities and role of each person involved in the research project including consultants, research assistants, secretaries, data collection and data management staff, statistician, etc. Include the percentage of time devoted to the project by each person. If a percentage of any person's time is to be supported by the institution/another grant or as "in-kind", indicate and explain in the justification of the budget request for the position.
- **Equipment.** Equipment requests should not represent a major portion of the budget or the only budget item. The narrative for equipment requests should: (1) identify the availability of matching funds, if any, or other funds that will contribute to the purchase of the item, (2) explain why the item is absolutely essential to the study, (3) identify where the equipment will be housed during and after



the completion of the study, and (4) list the expected depreciation of the item over a 2 year period and the estimated value of the item 2 years after purchase. Ownership of the item at the completion of the study will be individually assessed.

- **Travel.** Only reasonable travel for data collection will be considered. Specify the purpose, personnel involved, distance, number of trips, mode of travel, and cost of travel.
- **Software.** Request software only if the institution does not provide it. Software purchases will be considered if the unit price reflects the current discounted or retail rate.
- **Other Support.** Identify any additional funding that has already been awarded for the proposed study. Explain how the work supported by other sources is different from the present request. Overlaps in funding are generally not funded unless it is convincingly explained how the present award is designed to support a portion of the project that is not covered by the overlapping funds.
- **Pending Funding.** If there is other pending funding for the proposed project, identify the amount, agency, and date the funding is expected to be initiated, if awarded. Explain how the present award will be adjusted if funding is received from more than one pending source, e.g., one of the awards will be turned down, more performance sites will be added, the sample size will be increased, additional staff will be hired, etc. Please notify the ONS Foundation of any additional funding that is awarded after the submission deadline. If no additional funding is available or pending for the project, write “Not Applicable” in this section of the narrative. The USPHS Form 398 Page entitled, “Other Support” may be submitted.

**APPLICATION SUBMISSION COMPONENTS:**

<b><u>Submission includes the following:</u></b>
<ul style="list-style-type: none"> <li>• <b><u>\$25.00 Application Fee Confirmation Number:</u></b> Upon receipt of payment, an email will be received with a confirmation number. This number must be entered during the online submission process.</li> </ul> <p><b>Note:</b> You will not be able to complete your submission until this number has been entered.</p>
<ul style="list-style-type: none"> <li>• <b><u>Research Team:</u></b> Enter the name, credentials, institution and role of each member of your research team. <i>(If you have members that will be determined at a later date, simply enter TBD in the name, credentials and institution areas and enter the “Role” that person will be filling in the appropriate area.)</i></li> </ul>
<ul style="list-style-type: none"> <li>• <b><u>Signed Dissertation Project form</u></b></li> </ul>
<ul style="list-style-type: none"> <li>• <b>IRB</b> <ul style="list-style-type: none"> <li>○ If you have already received IRB approval, enter date of approval and assurance identification number and upload IRB or animal welfare committee approval letter.</li> </ul> <p style="text-align: center;"><b>OR</b></p> <li>○ Check the box indicating IRB submission will be done upon notification of funding</li> </li></ul>
<ul style="list-style-type: none"> <li>• <b><u>Email from immediate Supervisor/Chairperson:</u></b> (confirming approval of the proposed study) This email will need to be uploaded during the submission process.</li> </ul>
<ul style="list-style-type: none"> <li>• <b><u>Abstract</u></b> (1-page, 500 words) <i>(To be Uploaded in a PDF format)</i></li> </ul>
<ul style="list-style-type: none"> <li>• <b><u>Project Narrative:</u></b> 6 typewritten, single-spaced and numbered pages <i>(To be uploaded in a PDF format)</i></li> </ul>

<b><u>As part of the online submission process, you will be asked to upload a PDF with 1-2 paragraphs of text on the following areas:</u></b> (See page 7 for details on the following areas)
<b><u>NOTE:</u></b> The following areas are all part of the evaluation criteria for the reviewers.
<ul style="list-style-type: none"> <li>• <b><u>ONS Research Priorities and/or Research Agenda:</u></b> Provide 1-2 paragraphs on how the project addresses the research priorities and/or research agenda.</li> </ul>



<ul style="list-style-type: none"> <li>• <u>Protection of Human Subjects or Animals Used for Research</u>: Provide 1-2 paragraphs on informed consent and participants' rights and the data and safety monitoring plan.</li> </ul>
<ul style="list-style-type: none"> <li>• <u>Women and Minority Inclusion in Clinical Research</u>: Provide 1-2 paragraphs with information on the population composition.</li> </ul>
<ul style="list-style-type: none"> <li>• <u>Innovation</u>: Provide 1-2 paragraphs on how the project challenges existing paradigms or clinical practice.</li> </ul>
<ul style="list-style-type: none"> <li>• <u>Facilities and Resources (Environment)</u>: Provide 1-2 paragraphs on the available facilities and resources.</li> </ul>
<ul style="list-style-type: none"> <li>• Implications for Practice and Research: <u>Provide 1-2 paragraphs on the implications for oncology nursing practice.</u></li> </ul>
<p><b>The following documents will need to be Uploaded in a PDF format.</b></p>
<ul style="list-style-type: none"> <li>• <u>Reference List</u>:</li> </ul>
<ul style="list-style-type: none"> <li>• <u>Timetable</u>:</li> </ul>
<ul style="list-style-type: none"> <li>• <u>Certificate of completion of a human participants protection education course</u>: <i>(All certificates are to be uploaded in a PDF format. If multiple certificates need to be submitted, <u>combine and scan them into ONE PDF document</u> prior to uploading. More than one document cannot be uploaded in this section.) SKIP THIS ENTRY if no human or animal subjects will be included in your study.</i></li> </ul>
<ul style="list-style-type: none"> <li>• <u>Support letters</u>: <i>(All letters are to be scanned into one PDF document prior to uploading) More than one document cannot be uploaded in this section.)</i></li> </ul>
<ul style="list-style-type: none"> <li>• <u>Biographical sketches</u>: One will be needed for each member of the research team (Use New NIH OMB No. 0925-0001/0002 biosketch form) or download form from the forms area of the following ONS Website (<a href="http://www.onsfoundation.org/apply/re/RE01">http://www.onsfoundation.org/apply/re/RE01</a>). <i>(All biosketches are to be scanned <u>into ONE PDF document</u> prior to uploading. More than one document cannot be uploaded in this section.)</i></li> </ul>
<ul style="list-style-type: none"> <li>• <u>Instrument(s)</u>: <i>(Multiple documents will need to be scanned <u>into ONE PDF document</u> prior to uploading. More than one document cannot be uploaded in this section.)</i></li> </ul>
<ul style="list-style-type: none"> <li>• <u>Consent Form(s)</u>: <i>(Multiple documents will need to be scanned <u>into ONE PDF document</u> prior to uploading. More than one document cannot be uploaded in this section.)</i></li> </ul>
<ul style="list-style-type: none"> <li>• <u>Miscellaneous</u>: Upload any other documents needed, in a PDF format. <i>(Multiple documents will need to be scanned <u>into ONE PDF document</u> prior to uploading.) More than one document cannot be uploaded in this section.</i></li> </ul>
<ul style="list-style-type: none"> <li>• <u>Itemized Budget</u>: (Use attached Budget Worksheet or download from forms area of the following ONS Website (<a href="http://www.onsfoundation.org/apply/re/RE03">http://www.onsfoundation.org/apply/re/RE03</a>))</li> </ul>
<ul style="list-style-type: none"> <li>• <u>Budget Justification</u>:</li> </ul>
<p><b>Research Classification Categories: Review the categories below and be prepared to indicate the appropriate areas that pertain to your study during the submission process.</b></p>

**SUBMISSION INSTRUCTIONS:**

**All application submissions must be finalized by 11:59 p.m. on September 15, 2016.**

<p><b><u>NOTE:</u></b> Investigators are encouraged to <u>review all materials</u> submitted for completeness and accuracy <b><u>PRIOR</u></b> to hitting "Submit" as <b><u>no</u></b> editing will be allowed once the application submission is completed.</p>
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## **EXPECTATIONS FOR RECIPIENTS:**

- **PROGRESS AND FINAL REPORTS:**

For all funded projects, annual progress reports are required for release of the year-2 funds (15% of the total funding awarded). A final report of expenditures and a final scientific report must be submitted 60 days following the original or amended project funding period. The remaining 10% of the grant funds will only be released when the final scientific report is received on time. Guidelines for submitting these reports will be provided to all grant recipients. Unexpended funds revert to the ONS Foundation.

Please note, the final report guidelines request a summary of results and abstract suitable for posting online to promote dissemination of findings to practicing nurses and the lay public.

Recipients also agree to complete a follow-up survey at one, three, and five years after the completion of the funding project. The purpose of the survey is to track dissemination activities and additional funding which have occurred related to the ONS Foundation funded project.

- **ACKNOWLEDGEMENT OF FUNDING:**

Investigators must acknowledge that this dissertation research was funded by the **Oncology Nursing Society Foundation** through an unrestricted grant from the supporting donor in all publications and presentations regarding their research.

- **DISSEMINATION OF RESULTS:**

The ONS Foundation is committed to the dissemination of research findings to support practice changes. A summary of results and final abstract will be posted online and shared with the ONS Foundation Public Relations Manager to promote dissemination of results from ONS Foundation funded projects. Dissertation research grant recipients are responsible for disseminating the findings of their funded project. Submission of manuscripts to peer reviewed scientific or professional journals is required. Award recipients are encouraged to submit abstracts to ONS National Conferences and publish their final results in ONS publications.

## **INCOME TAX CONSIDERATIONS:**

The ONS Foundation is required by the Internal Revenue Service to report grant awards on Form 1099-Misc. The award recipient's institution will receive an IRS 1099-Misc. form no later than January 31 of the year following funding year. If additional compensation is received from the award recipient's employer/institution regarding this award, it is the employer/institution's responsibility to issue to the recipient a W-2 or Form 1099-Misc. Award recipients will be asked to designate how the funds should be distributed at the time the award is made.

## Oncology Nursing Society Foundation Research Classification Form

**INSTRUCTIONS:** As part of the online submission, you will be asked to check which of the following categories best describe the purpose and aims of your research proposal. This form will be provided online and does not need to be completed in this format. It is simply provided for your information and review, so that you can easily select the appropriate areas during the submission process.

This information is needed by the ONS Foundation to share with other cancer research funders who classify their research portfolios in the same way. This information is provided to the public on the International Cancer Research Portfolio Website at <http://www.icrpartnership.org>. Funded studies that have been classified using this unified classification system, the Common Scientific Outline, are available on the website. Additional information on this form is needed for the ONS Foundation's Grants Database.

**Biology:** *(research looking at the biology of how cancer starts and progresses)*

- 1.1 Normal functioning
- 1.2 Cancer initiation: alterations in chromosomes
- 1.3 Cancer initiation: oncogenes & tumor suppressor genes
- 1.4 Cancer progression & metastasis
- 1.5 Resources & infrastructure

**Etiology:** *(research aiming to identify causes or origins of cancer – genetic, environmental, & lifestyle)*

- 2.1 Exogenous factors in the origin and cause of cancer
- 2.2 Endogenous factors in the origin and cause of cancer
- 2.3 Interactions of genes and/or genetic polymorphisms with exogenous and/or endogenous factors
- 2.4 Resources & infrastructure related to etiology

**Prevention:** *(research identifying individual & population-based prevention interventions, reducing cancer risk)*

- 3.1 Interventions to prevent cancer: personal behaviors (non-dietary) that affect cancer risk
- 3.2 Dietary Interventions to reduce cancer risk and nutritional science in cancer prevention
- 3.3 Chemoprevention
- 3.4 Vaccines
- 3.5 Complementary & alternative prevention approaches
- 3.6 Resources & infrastructure related to prevention

**Early Detection, Diagnosis & Prognosis:** *(identifying and testing cancer markers and imaging methods helpful in detecting and/or diagnosing cancer or support treatment decision making in stratified/personalized medicine)*

- 4.1 Technology development and/or marker discovery
- 4.2 Technology and/or marker evaluation with respect to fundamental parameters of method
- 4.3 Technology and/or marker testing in a clinical setting
- 4.4 Resources & infrastructure related to detection, diagnosis or prognosis

**Treatment:** *(identifying and testing treatments administered locally (radiotherapy/surgery) systematically (chemotherapy) and non-traditional (complementary/alternative) treatments (supplements/herbs).*

- 5.1 Localized therapies- discovery and development
- 5.2 Localized therapies - clinical applications
- 5.3 Systematic therapies - discovery and development
- 5.4 Systematic therapies - clinical applications
- 5.5 Combinations of localized & systemic therapies
- 5.6 Complementary & alternative treatment approaches
- 5.7 Resources & infrastructure related to treatment

**Cancer Control, Survivorship & Outcomes Research:** *(patient care, pain management, tracking cancer cases; beliefs attitudes affecting care behaviors, ethics, education/communication approaches for patients/family/caregivers/health care professionals; supportive/end-of-life care; health care delivery in terms of quality and cost effectiveness)*

- 6.1 Patient Care and Survivorship Issues (Includes symptom management, QOL and compliance behavior factors)
- 6.2 Surveillance
- 6.3 Population-based behavior factors (includes influence by attitudes/belief systems on behaviors)
- 6.4 Health services, economic and health policy analyses
- 6.5 Education and communication
- 6.6 End of life care
- 6.7 Research on ethics & confidentiality
- 6.8 Historical code (no longer used)
- 6.9 Resources & infrastructure related to cancer control, survivorship & outcomes research

**Oncology Nursing Society Foundation  
Research Classification Form**

<b>Other:</b>
<input type="checkbox"/> Long-term Morbidity
<input type="checkbox"/> Quality of Life
<input type="checkbox"/> Pain Management
<input type="checkbox"/> Prevention of Treatment Related Toxicities
<input type="checkbox"/> Psychological Impacts of
<input type="checkbox"/> Cancer
<input type="checkbox"/> Reproductive Issues
<input type="checkbox"/> Rehabilitation
<input type="checkbox"/> Symptom Management
<input type="checkbox"/> Survivorship
<input type="checkbox"/> None
<b>Symptom Management:</b>
<input type="checkbox"/> Difficulty Concentrating
<input type="checkbox"/> Fatigue
<input type="checkbox"/> Hair Loss
<input type="checkbox"/> Mucositis
<input type="checkbox"/> Nausea
<input type="checkbox"/> Pain
<input type="checkbox"/> Shortness of Breath
<input type="checkbox"/> Sleep Disturbances
<input type="checkbox"/> None
<input type="checkbox"/> Other
<b>Treatment Type:</b>
<input type="checkbox"/> Biotherapy
<input type="checkbox"/> Chemotherapy
<input type="checkbox"/> Radiation Therapy
<input type="checkbox"/> Surgery
<input type="checkbox"/> Transplant
<input type="checkbox"/> Other
<input type="checkbox"/> None
<b>Cancer Type:</b>
<input type="checkbox"/> Basic Research, not site specific
<input type="checkbox"/> Bladder Cancer
<input type="checkbox"/> Brain Tumor
<input type="checkbox"/> Breast Cancer
<input type="checkbox"/> Cervical Cancer
<input type="checkbox"/> Colorectal Cancer
<input type="checkbox"/> Endometrial Cancer
<input type="checkbox"/> Esophageal Cancer
<input type="checkbox"/> Gall Bladder Cancer
<input type="checkbox"/> Hodgkin's Disease
<input type="checkbox"/> Kaposi's Sarcoma
<input type="checkbox"/> Kidney Cancer
<input type="checkbox"/> Laryngeal Cancer
<input type="checkbox"/> Liver Cancer
<input type="checkbox"/> Lung Cancer
<input type="checkbox"/> Nasal Cavity & Paranasal Sinus Cancer
<input type="checkbox"/> Neuroblastoma
<input type="checkbox"/> Non-Hodgkin's Lymphoma
<input type="checkbox"/> Oral Cavity & Lip Cancer
<input type="checkbox"/> Pancreatic Cancer
<input type="checkbox"/> Parathyroid Tumor
<input type="checkbox"/> Penile Cancer
<input type="checkbox"/> Pharyngeal Cancer
<input type="checkbox"/> Pituitary Tumor
<input type="checkbox"/> Prostate Cancer

**Oncology Nursing Society Foundation  
Research Classification Form**

<b>Cancer Type:</b> <i>Continued</i>
<input type="checkbox"/> Salivary Gland Cancer
<input type="checkbox"/> Small Intestine Cancer
<input type="checkbox"/> Soft Tissue Sarcoma
<input type="checkbox"/> Stomach Cancer
<input type="checkbox"/> Testicular Cancer
<input type="checkbox"/> Thymoma, Malignant
<input type="checkbox"/> Thyroid Cancer
<input type="checkbox"/> Uterine Cancer
<input type="checkbox"/> Vascular Sarcoma
<input type="checkbox"/> Vaginal Cancer
<input type="checkbox"/> Wilm's Tumor
<input type="checkbox"/> None
<b>Age:</b>
<input type="checkbox"/> Adult
<input type="checkbox"/> Children
<input type="checkbox"/> Elderly
<input type="checkbox"/> Combination
<input type="checkbox"/> None
<b>Gender Focus:</b>
<input type="checkbox"/> Male
<input type="checkbox"/> Female
<input type="checkbox"/> Both
<input type="checkbox"/> None
<b>Type of Research:</b>
<input type="checkbox"/> Qualitative
<input type="checkbox"/> Quantitative
<input type="checkbox"/> Both
<input type="checkbox"/> None
<b>Research Setting:</b>
<input type="checkbox"/> Multisite
<input type="checkbox"/> NCI
<input type="checkbox"/> Cooperative Group
<input type="checkbox"/> Single Site
<b>Scope:</b>
<input type="checkbox"/> International
<input type="checkbox"/> Local
<input type="checkbox"/> National
<input type="checkbox"/> None
<b>Subject:</b>
<input type="checkbox"/> Animal
<input type="checkbox"/> Cancer Patient
<input type="checkbox"/> Cancer Survivor
<input type="checkbox"/> Family/Caregiver
<input type="checkbox"/> Nurses
<input type="checkbox"/> Other Healthcare Provider
<input type="checkbox"/> Other
<input type="checkbox"/> None Quantitative
<b>Ethnicity Focus:</b>
<input type="checkbox"/> American Indian/Alaskan Native
<input type="checkbox"/> Asian
<input type="checkbox"/> Black or African American
<input type="checkbox"/> Hispanic or Latino
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander
<input type="checkbox"/> White

**Oncology Nursing Society Foundation  
Research Classification Form**

<b>Research Design:</b>
<input type="checkbox"/> Descriptive
<input type="checkbox"/> Health Services
<input type="checkbox"/> Interventional
<input type="checkbox"/> Program Evaluation
<input type="checkbox"/> Research Utilization/Evidence-Based Practice
<input type="checkbox"/> None

<b>2013 ONS Research Priorities:</b>
<input type="checkbox"/> Develop and evaluate intervention: Adherence
<input type="checkbox"/> Persistent and late effects: Neurocognitive
<input type="checkbox"/> Screening research minorities
<input type="checkbox"/> Symptom management: Self-management symptom control
<input type="checkbox"/> Screening early detection: Underserved or underinsured
<input type="checkbox"/> Survivorship: Survivorship care plan
<input type="checkbox"/> Persistent and late effects: Cardiovascular
<input type="checkbox"/> Descriptive research factors: Adherence
<input type="checkbox"/> Interventions symptom clusters
<input type="checkbox"/> Interventions risk reductions patients and survivors: Diet
<input type="checkbox"/> Survivorship: Psychological adjustment
<input type="checkbox"/> Persistent ant late effects: Pulmonary
<input type="checkbox"/> Intervention research to improve adherence to risk reduction for cancer patients and families: Tobacco
<input type="checkbox"/> Intervention research to improve adherence to risk reduction for populations at risk: Tobacco
<input type="checkbox"/> Medication errors: Prevention
<input type="checkbox"/> Risk reduction cancer patients and survivors: Stress management
<input type="checkbox"/> CLABSI prevention
<input type="checkbox"/> Use of technology: Symptoms
<input type="checkbox"/> Symptom management interventions
<input type="checkbox"/> Risk reductions patients and survivors: Physical activity and exercise
<input type="checkbox"/> None

<b>ONS Research Agenda Content Areas (2014-2018):</b>
<input type="checkbox"/> <b>Symptoms</b>
<input type="checkbox"/> Evaluating interventions integrating symptom management into systems of care
<input type="checkbox"/> Examining underlying bio-behavioral mechanisms for individual and co-occurring symptoms
<input type="checkbox"/> Determining factors associated with racial/ethnic disparities in symptom severity and developing interventions
<input type="checkbox"/> <b>Late Effects of Cancer Treatment and Survivorship Care</b>
<input type="checkbox"/> Developing/testing interventions to prevent adverse outcomes of long term/late effects
<input type="checkbox"/> Examining/testing underlying bio-behavioral mechanisms for individual/co-occurring symptoms
<input type="checkbox"/> <b>Palliative and End of Life Care</b>
<input type="checkbox"/> Exploring/evaluating research to enhance communication and shared decision-making
<input type="checkbox"/> Diversity in palliative/EOL care
<input type="checkbox"/> Exploring/testing models of palliative care delivery
<input type="checkbox"/> Exploring use of electronic health records to identify unmet palliative care needs
<input type="checkbox"/> Researching how to support/evaluate professional education/development models for improving palliative/EOL care
<input type="checkbox"/> <b>Self-Management</b>
<input type="checkbox"/> Developing/testing measures of self-management outcomes
<input type="checkbox"/> Developing/testing models of care in self-management
<input type="checkbox"/> Developing/testing self-management interventions for individuals/family caregivers
<input type="checkbox"/> Developing/testing interventions to improve adherence with prescribed/recommended plans of care
<input type="checkbox"/> <b>Aging</b>
<input type="checkbox"/> Carrying out descriptive work to obtain information needed to fill knowledge gaps
<input type="checkbox"/> Developing/testing interventions to improve the care of older patients
<input type="checkbox"/> Evaluating factors associated with the delivery of care



**Oncology Nursing Society Foundation  
Research Classification Form**

<b>ONS Research Agenda Priority Topics:</b> <i>(Continued)</i>	
<input type="checkbox"/>	<b>Family and Caregivers</b>
	<input type="checkbox"/> Identifying impact of caregiver outcomes on patient outcomes
	<input type="checkbox"/> Determining impact of the stress of providing care on the caregiver's physiologic health
	<input type="checkbox"/> Exploring the extent of economic burden and its impact on families of persons with cancer
<input type="checkbox"/>	<b>Improving Health Care Systems</b>
	<input type="checkbox"/> Expanding the knowledge of patient-centered cancer nursing care
	<input type="checkbox"/> Evaluating the effect of nursing care on promoting and maintaining treatment quality and safety
<input type="checkbox"/>	<b>Risk Reduction</b>
	<input type="checkbox"/> Developing/testing interventions to sustain cancer screening behavior beyond one-time screening
	<input type="checkbox"/> Developing/testing innovative/cost-effective interventions to change health behaviors in populations that can reduce/prevent cancer
	<input type="checkbox"/> Developing/testing dissemination and implementation of evidence-based interventions in cancer screening



## *Dissertation Research Grants Program*

### **FORMS NEEDED**

- ◆ *Biographical Sketch Form*
- ◆ *Budget Worksheet*
- ◆ *Dissertation Project Form*

Principal Investigator/Program Director (Last, First, Middle):

## BIOGRAPHICAL SKETCH

Provide the following information for the senior/key personnel and other significant contributors in the order listed on Form Page 2.  
Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME

eRA COMMONS USER NAME:

POSITION TITLE

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)

INSTITUTION AND LOCATION	DEGREE (if applicable)	Completion Date MM/YYYY	FIELD OF STUDY

**NOTE: The Biographical Sketch may not exceed five pages.**

**A. Personal Statement.** Briefly describe why you are well-suited for your role in the project described in this application. The relevant factors may include aspects of your training; your previous experimental work on this specific topic or related topics; your technical expertise; your collaborators or scientific environment; and your past performance in this or related fields (you may mention specific contributions to science that are not included in Section C). Also, you may identify up to four peer reviewed publications that specifically highlight your experience and qualifications for this project. If you wish to explain impediments to your past productivity, you may include a description of factors such as family care responsibilities, illness, disability, and active duty military service.

**B. Positions and Honors.** List in chronological order previous positions, concluding with the present position. List any honors. Include present membership on any Federal Government public advisory committee.

**C. Contribution to Science.** Briefly describe up to five of your most significant contributions to science. For each contribution, indicate the historical background that frames the scientific problem; the central finding(s); the influence of the finding(s) on the progress of science or the application of those finding(s) to health or technology; and your specific role in the described work. For each of these contributions, reference up to four peer-reviewed publications or other non-publication research products (can include audio or video products; patents; data and research materials; databases; educational aids or curricula; instruments or equipment; models; protocols; and software or netware) that are relevant to the described contribution. The description of each contribution should be no longer than one half page including figures and citations. Also provide a URL to a full list of your published work as found in a publicly available digital database such as SciENcv or My Bibliography, which are maintained by the US National Library of Medicine.

**D. Research Support.** List both selected ongoing and completed research projects for the past three years (Federal or non-Federally-supported). Begin with the projects that are most relevant to the research proposed in the application. Briefly indicate the overall goals of the projects and responsibilities of the key person identified on the Biographical Sketch. Do not include number of person months. **DO INCLUDE RESEARCH FUNDING AMOUNTS FOR EACH FUNDED PROJECT.**

Principal Investigator/Program Director (Last, First, Middle):

**ONS Foundation Dissertation Research Grants Program**

**BUDGET WORKSHEET**

	<u>Year 1</u>				<u>Year 2</u>					Grand Totals	
	Salary		Fringe		Year 1 Total	Salary		Fringe			Year 2 Total
	% Effort	\$	%	\$		% Effort	\$	%	\$		
<b>Personnel</b>											
<b>Supplies</b>											
<b>Equipment</b>											
<b>Travel</b>											
<b>Software</b>											
<b>Other Expenses</b>											
<b>TOTAL</b>											

(See application instructions for a detailed description of each budget category)

**Note:** The budget justification must include a justification of all of the above itemized expenses including personnel. Each section of the justification should describe why the items or personnel are essential to the conduct of the study. The lack of institutional resources for particular items should be described.

**Note:** If the study cannot be completed with the funds requested, it is essential to report "Other Support" to demonstrate how the remaining costs will be covered to assure that the study can be done.



## ONS FOUNDATION DISSERTATION RESEARCH GRANTS PROGRAM

### *Dissertation Projects*

# **INSTRUCTIONS AND SIGNATURE FORM**

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

Is this proposed study your dissertation project?

YES  NO

**Has this proposed dissertation project been approved and signed off by all members of the committee?**

Approved projects represent the final version of the dissertation proposal; the version that has been *approved and signed-off* by all of the members of a student's supervisory committee. The Oncology Nursing Society Foundation will accept applications for PhD/DNSc dissertations **ONLY IF THE PROJECT HAS BEEN APPROVED AND SIGNED OFF BY THE PRINCIPAL INVESTIGATOR'S DISSERTATION COMMITTEE.**

### **DISSERTATION COMMITTEE CHAIRPERSON'S SIGNATURE REQUIRED:**

Faculty Chairperson (Name, Title, Address, Signature, Date)

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***I certify that the submitted grant application represents the final (approved) version of the student's dissertation proposal approved by the student's dissertation committee. No changes to this proposal will be made. (I have attached the signed University Proposal Approval Form.)***

Signature

Date