# Queen's University and Queen's University Faculty Association

## Fund for Scholarly Research and Creative Work and Professional Development (Adjuncts)

## Application Form (2024-25) Fall Term

Please consult Article 36.2 of the *Collective Agreement for Faculty, Librarians and Archivists,* and the "Guidelines" regarding this Fund.

**Submission Instructions:**

**Follow the submission instructions carefully.** **Applications and supporting documents <u>MUST</u> be submitted electronically in one (1) PDF file to FRO@queensu.ca**

*Applications will <u>NOT</u> be checked for completeness and applications with missing information may not be processed. *

## Section 1 – General Information

| Title | First Name | Last Name |
|---|---|---|
|  |  |  |

| Unit / Department | Employee ID |
|---|---|
|  |  |

**Queen's email**

|  |
|---|

**Check appropriate box**

- [ ] I am currently a QUFA member and have a Term Adjunct appointment at Queen's University during this academic term.
- [ ] I am currently a QUFA member and have a Continuing Adjunct appointment at Queen's University during this academic term.

**Teaching Load in the current academic year (May 1 – April 30).**

- [ ] I am teaching **more than one full-course** (1.0) in total (maximum award $5,000)
- [ ] I am teaching **one full-course (1.0) or less** in total (maximum award $2,500)

**I hereby apply for an award from the 2024-25 Fund for Scholarly Research and Creative Work and Professional Development (Adjuncts).** *Please check all appropriate box(s)*

| ☐ Salary Stipend for $_____ | ☐ Research Grant for $_____ |
|---|---|
| **Total amount requested:** | $_____ CDN |

## Section 2 – Description of Project (s)

**Provide a brief description (200 words maximum) of the research, scholarship, creative work and/or professional development project(s) to be undertaken or planned.  <u>Clearly</u> outline the objectives and methodology (as applicable) and expected outcomes.**

**In the space below, <u>clearly</u> state how your application supports your own scholarly research and creative work or professional development, and how it relates to your teaching at Queen's.**

**If you are applying for a Research Grant <u>and</u> Salary Stipend, you must complete <u>both</u> budget forms.**

## Section 3:  Budget Form 1 - Application for a Grant (*complete if applicable*)

| Type of Expense<br>(include relevant dates/location of events) | Estimated Cost<br>($ CDN) | Comments / Provide Explanation |
|---|---|---|
| Location: Venue; Location; dates etc. | | |
| Transportation:  (air, train, car) | | |
| Accommodation:  (# of nights) | | |
| Registration/Conference Fees | | |
| Meals: | | |
| Local transport: (taxi, bus) | | |

**Other Expenses:**

| | | |
|---|---|---|
| Rental costs | | |
| Supplies (itemize) additional space below | | |
| Equipment purchases (itemize) | | |
| Printing costs | | |
| | | |
| | | |
| **TOTAL** | | |

## Section 4:   Budget Form 2 - Application for a Stipend (*complete if applicable*)

Expected number of hours to complete your project times the hourly rate (Please use an hourly rate of **$52.00 )**

_____(# of Hours)          x          $52.00 (hourly rate)   =          $_____

Provide a brief rationale for how the amount was determined.

## Section 5:  Curriculum Vitae

Please include an abbreviated curriculum vitae (**3 pages maximum**) with your application.  It should include education, work experience (including courses taught), and highlights of recent publications, especially those relevant to the proposed project.

## Section 6:  Research Ethics Board (REB) Approval

If your project requires an ethics approval or other certifications, please ensure they are active.  You must include a copy of your REB approval letter to fro@queensu.ca with your application or funds will be held until this REB approval letter is received.

## Section 7:  Previous Award(s) (if applicable) *(please check box below)*

Adjunct Members who receive awards from the Fund for Scholarly Research and Creative Work and Professional Development (Adjuncts) shall submit a report to the Subcommittee of the JCAA on the progress or completion of their previous scholarly or creative work, or professional development as set out in their application to the Fund.

☐ **I HAVE COMPLETED** my scholarly or creative work or professional development as described in my previous application.

☐ **I AM STILL WORKING** on my scholarly or creative work or professional development as described in my previous application.

Indicate what percentage of your work has been completed. _____%

**Provide a brief description of your research, scholarship, creative work and/or professional development project(s) that has been completed.  If the project is not yet complete, indicate what remains to be done and the anticipated timelines to completion.**

## Section 8:  Signatures and Approvals

I am applying to the Fund for Scholarly Research and Creative Work and Professional Development and confirm that the application is complete and accurate.

_____                    _____
Member's Signature                                                                          Date (YYYY/MM/DD)

**\*\*Applications not signed by Department Head / Assoc. Dean / Dean (or designate) will not be processed\*\***

## Departmental Review

I confirm that the applicant is a QUFA member and has an adjunct appointment at Queen's University during the current academic term, and that the teaching load (shown in section 1) for this academic year is correct.

Dept. Head / Assoc. Dean / Dean (or designate) name:

_____
*(Please print clearly and provide your position title.  You may be contacted by the Committee members)*

Dept. Head / Assoc. Dean / Dean (or designate) signature:

Date:(YYYY/MM/DD)

_____                    _____
*(Signature)*

***\*\*\*This application may require more than one signature if teaching in multiple units\*\*\****

Dept. Head / Assoc. Dean / Dean (or designate with signing authority) name:

_____
*(Please print clearly and provide your position title.  You may be contacted by the Committee members)*

Dept. Head / Assoc. Dean / Dean (or designate) signature:

Date:(YY/MM/DD)

_____                    _____
(Signature)

**Direct all Scholarly Research Fund inquiries to Faculty Relations general mailbox at [fro@queensu.ca](mailto:fro@queensu.ca) .  Direct all TRAQ related questions to: TRAQ Help Desk, 613-533-6000 ext. 78426 or email [traq@queensu.ca](mailto:traq@queensu.ca)**

**PRINT** this form to obtain appropriate signatures