

# Public Engagement Accelerator Fund Application Form

## Applicant & External Partner Information

### Principal Applicant/Contact

Prefix \_\_\_\_\_  
First Name \_\_\_\_\_  
Surname \_\_\_\_\_  
Email \_\_\_\_\_  
Telephone \_\_\_\_\_  
Faculty/Unit \_\_\_\_\_  
Department \_\_\_\_\_  
Position \_\_\_\_\_

### Affiliation

- Faculty
- Staff
- PhD Student
- Postdoctoral Position

### Status

If term appointed, please indicate anticipated end date below.

- Full time
- Part time
- Term Appointment
- Retired

### End date, if known:

\_\_\_\_\_

### Co-applicants

Please indicate number of MUN co-applicants (if applicable).

- 1
- 2
- 3

### Co-Applicant 1

Prefix \_\_\_\_\_  
First Name \_\_\_\_\_  
Surname \_\_\_\_\_  
Email \_\_\_\_\_  
Telephone \_\_\_\_\_  
Faculty/Unit \_\_\_\_\_  
Department \_\_\_\_\_  
Position \_\_\_\_\_

 Co-Applicant 2

Prefix \_\_\_\_\_  
First Name \_\_\_\_\_  
Surname \_\_\_\_\_  
Email \_\_\_\_\_  
Telephone \_\_\_\_\_  
Faculty/Unit \_\_\_\_\_  
Department \_\_\_\_\_  
Position \_\_\_\_\_

 Co-Applicant 3

Prefix \_\_\_\_\_  
First Name \_\_\_\_\_  
Surname \_\_\_\_\_  
Email \_\_\_\_\_  
Telephone \_\_\_\_\_  
Faculty/Unit \_\_\_\_\_  
Department \_\_\_\_\_  
Position \_\_\_\_\_

 External Principal Applicant/Partner

Prefix \_\_\_\_\_  
First Name \_\_\_\_\_  
Surname \_\_\_\_\_  
Email \_\_\_\_\_  
Telephone \_\_\_\_\_  
Organization \_\_\_\_\_  
Department (if applicable) \_\_\_\_\_  
Position \_\_\_\_\_

 Additional External Co-applicants (where applicable)

Please indicate number of additional external co-applicants (if applicable).

- 1
- 2
- 3

 External Co-applicant 1

Prefix \_\_\_\_\_  
First Name \_\_\_\_\_  
Surname \_\_\_\_\_  
Email \_\_\_\_\_  
Telephone \_\_\_\_\_

Organization \_\_\_\_\_

Department (if applicable) \_\_\_\_\_

Position \_\_\_\_\_

 External Co-applicant 2

Prefix \_\_\_\_\_

First Name \_\_\_\_\_

Surname \_\_\_\_\_

Email \_\_\_\_\_

Telephone \_\_\_\_\_

Organization \_\_\_\_\_

Department (if applicable) \_\_\_\_\_

Position \_\_\_\_\_

 External Co-applicant 3

Prefix \_\_\_\_\_

First Name \_\_\_\_\_

Surname \_\_\_\_\_

Email \_\_\_\_\_


Telephone \_\_\_\_\_

Organization \_\_\_\_\_

Department (if applicable) \_\_\_\_\_


Position \_\_\_\_\_

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 Project Information


 Project Title

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 Project Synopsis

Please provide a brief synopsis of your project in one or two sentences. (Note: This will be published on our website if awarded) (max. 100 words).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 Overview and Objectives

Please expand on your synopsis by providing an overview of the proposed project, including the primary objectives (max. 300 words).

\_\_\_\_\_

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 Activities/Timelines

Please outline the project activities and timelines. Please note: research projects and activities that require human or animal subjects and/or ethical review are not supported under the Accelerator Fund for Public Engagement. (max. 300 words)

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 Partnership - Mutual Contributions and Mutual Benefits

a) Please describe the mutual contributions by the partners/collaborators involved. (max. 300 words)

b) Please describe how the project will result in mutual benefit for both Memorial and external partners and collaborators (and broader publics if relevant). (max. 300 words)

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 Alignment with Memorial's Public Engagement Framework

Please select 1 or 2 objectives from Memorial's Public Engagement Framework and briefly describe how the proposed project is aligned with each of these objectives. (max. 300 words)


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 Please comment on your plan for disseminating the results of this project.(max. 200 words).


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 Please comment on the potential impacts you hope will result from the work of this project and/or partnership. (max. 200 words).

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 Additional Collaborators


Please provide the information for any confirmed additional project collaborators. These may be partners from within or outside the University.

 Do you have any other collaborators in addition to the External Collaborator? (Up to 3)


- 1
- 2
- 3

 Collaborator 1 Contact Information


Name \_\_\_\_\_  
Organization/Affiliation \_\_\_\_\_  
Email \_\_\_\_\_  
Telephone \_\_\_\_\_

 Collaborator 2 Contact Information


Name \_\_\_\_\_  
Organization/Affiliation \_\_\_\_\_  
Email \_\_\_\_\_  
Telephone \_\_\_\_\_

 Collaborator 3 Contact Information

Name \_\_\_\_\_  
Organization/Affiliation \_\_\_\_\_  
Email \_\_\_\_\_  
Telephone \_\_\_\_\_


 Are there any students involved with this project?

- Yes
- No

 Please provide details of student involvement. (max. 100 words)


\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_


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 Project Schedule, Budget and Contributions


Please provide details about the timeline of your project, your projected budget and any other funding sources and contributions.

 Project Dates

 Proposed project start date  
\_\_\_\_/\_\_\_\_/\_\_\_\_(YYYY/MM/DD)

 Proposed project end date  
\_\_\_\_/\_\_\_\_/\_\_\_\_(YYYY/MM/DD)

 Budget & Contributions


 Total cost of project

\_\_\_\_\_

 Financial contributions from other sources

If you have received any financial contributions from other sources, please select the number (up to 5) from the pulldown menu, and fill in the amount and name of the source.


- Financial contributions received from other sources:
- 1
  - 2
  - 3
  - 4
  - 5

 Financial Contribution 1

Amount of Contribution \_\_\_\_\_

Source \_\_\_\_\_


Has this contribution been confirmed?  
 Yes  
 No

 Financial Contribution 2

Amount of Contribution \_\_\_\_\_

Source \_\_\_\_\_


Has this contribution been confirmed?  
 Yes  
 No

 Financial Contribution 3

Amount of Contribution \_\_\_\_\_

Source \_\_\_\_\_


Has this contribution been confirmed?  
 Yes  
 No

 Financial Contribution 4

Amount of Contribution \_\_\_\_\_

Source \_\_\_\_\_


Has this contribution been confirmed?  
 Yes  
 No

 Financial Contribution 5


Amount of Contribution \_\_\_\_\_

Source \_\_\_\_\_

Has this contribution been confirmed?  
 Yes  
 No

 Amount requested from the Accelerator Fund for Public Engagement

\_\_\_\_\_

 Proposed Budget

Please indicate the intended uses of the requested Accelerator funds only. Provide the number and type of budget categories. (For example: "Materials", "Travel", "Student Assistance/Coordination", "Catering", "Venue", "Other"). Include a brief rationale for each category and a breakdown of anticipated costs. You may refer to the Applicant Fund Guide for additional information on eligible expenses.

Budget Categories

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

 Budget item 1

Budget category \_\_\_\_\_  
Amount (\$) \_\_\_\_\_  
Justification and Cost Breakdown \_\_\_\_\_

 Budget item 2

Budget category \_\_\_\_\_  
Amount (\$) \_\_\_\_\_  
Justification and Expense Breakdown \_\_\_\_\_

 Budget item 3

Budget category \_\_\_\_\_  
Amount (\$) \_\_\_\_\_  
Justification and Expense Breakdown \_\_\_\_\_

 Budget item 4

Budget category \_\_\_\_\_  
Amount (\$) \_\_\_\_\_  
Justification and Expense Breakdown \_\_\_\_\_

 Budget item 5


Budget category \_\_\_\_\_  
Amount (\$) \_\_\_\_\_  
Justification and Expense Breakdown \_\_\_\_\_

 Budget item 6

Budget category \_\_\_\_\_  
Amount (\$) \_\_\_\_\_  
Justification and Expense Breakdown \_\_\_\_\_

 Budget item 7

Budget category \_\_\_\_\_  
Amount (\$) \_\_\_\_\_  
Justification and Expense Breakdown \_\_\_\_\_

 Budget item 8


Budget category \_\_\_\_\_  
Amount (\$) \_\_\_\_\_  
Justification and Expense Breakdown \_\_\_\_\_

 Budget item 9

Budget category \_\_\_\_\_  
Amount (\$) \_\_\_\_\_  
Expense justification and breakdown of costs \_\_\_\_\_

 Budget item 10

Budget category \_\_\_\_\_  
Amount (\$) \_\_\_\_\_  
Justification and cost breakdown \_\_\_\_\_

 Describe any other funding sources you have considered for this project.  
If you applied, indicate the status of your proposal. If you did not apply, explain why.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 In-kind Contributions

If you have received or are providing any in-kind contributions, please select the number (up to 5) from the pulldown menu, and fill in the appropriate fields.

In-kind contributions provided by the applicant or by collaborators:

- 1
- 2
- 3
- 4
- 5

 In-kind Contribution 1

Contribution (\$) \_\_\_\_\_  
Source and Description of Contribution \_\_\_\_\_  
Have these contributions been confirmed?  Yes  
 No

 In-kind Contribution 2

Contribution (\$) \_\_\_\_\_  
Source and Description of Contribution \_\_\_\_\_  
Have these contributions been confirmed?  Yes  
 No

 In-kind Contribution 3

Contribution (\$) \_\_\_\_\_  
Source and Description of Contribution \_\_\_\_\_



Have these contributions been confirmed?

- Yes
- No


 In-kind Contribution 4

Contribution (\$) \_\_\_\_\_

Source and Description of Contribution \_\_\_\_\_

Have these contributions been confirmed?

- Yes
- No

 In-kind Contribution 5

Contribution (\$) \_\_\_\_\_

Source and Description of Contribution \_\_\_\_\_

Have these contributions been confirmed?

- Yes
- No

Terms & Conditions

By submitting this application the principal applicant agrees that if awarded funding, they shall: Commence the project within two months of the date of notification of award. Complete a brief project synopsis on [www.yaffle.ca](http://www.yaffle.ca) upon submission of signed terms. Complete report submission via our on-line reporting form as per fund guidelines. Acknowledge the support of Memorial's Public Engagement Accelerator Fund in any and all communications related to the project. Acknowledge that the Office of Public Engagement (OPE) has the right to use all or portions of submitted materials on our website and through other communications channels. Use the funding provided for the purposes as proposed and according to university and fund guidelines. Notify OPE in case of changes to the substance or timeline of the project and accept that failure to complete the project as per original proposal may result in the termination of award funding. Return unspent funds to OPE after the project has been completed or terminated. Accept that the funding allocation will be dispersed in two installments. 70% percent of the funding will be released upon the receipt of a signed award form; the remaining 30% will be released on completion of deliverables.

I understand and agree to the Terms & Conditions above.