

**國家衛生研究院 合作研究計畫書(個人型)**  
**National Health Research Institutes**  
**Collaborative Research Program**

**Form Section 1 - Face Page**

Title of Application	(in Chinese)		
	(in English)		
Type of Application	<input checked="" type="checkbox"/> New <input type="checkbox"/> Revision or Amendment <input type="checkbox"/> Renewal <input type="checkbox"/> Revised Renewal The prior application was submitted in ____ (A. D. year), with the title: (in English)		
Fields of Research			
Applicant Organization	(in Chinese)		系／所／科
	(in English)		Department
Principal Investigator	姓名		職稱
	Name		Position Title
Mailing Address (in Chinese)			
Telephone No.		FAX No.	
E-mail Address			
Entire Proposed Project Period	From _____ to _____ (Month) (Day) (Year)    (Month) (Day) (Year)		
Budget Requested for Initial Year		NT\$	
Budget Requested for Entire Proposed Project Period		NT\$	
Projects involving	Human Subjects	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Gene Recombination	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Vertebrate Animal	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Form Section 2a - Abstract in Chinese



Form Section 2b - Abstract in English



Form Section 3 - Research Plan

A. Specific Aims



**Form Section 3 - Research Plan**

**B. Background and Significance**

**Form Section 3 - Research Plan**

**C. Preliminary study**



**Form Section 3 - Research Plan**

**D. Research Design and Methods**



**Form Section 3 - Research Plan**

**E. Anticipated Results**





**Form Section 3 - Research Plan**

**F. Human Subjects**



**Form Section 3 - Research Plan**

**G. Animal Investigation**



**Form Section 3 - Research Plan**

**H. Potential Hazards**

Form Section 3 - Research Plan

I. References

Form Section 4 - Institutional Environment and Resources



**Form Section 5 - Personnel**

Name of Participant		Position Title	Highest Degree	% Effort	Role in Project
Chinese	English				

**Form Section 6a - Budget Requested for Personnel**

Year	Personnel	Amount (in NT\$)	Justifications

**Form Section 6b - Budget Requested for Miscellaneous, Maintenance, Travel, Consumables, and Overhead**

Year	Budget Categories and Items	Amount (in NT\$)	Justifications



Budget Categories	Initial Contract Period	2 <sup>nd</sup> year	3 <sup>rd</sup> year	4 <sup>th</sup> year	5 <sup>th</sup> year
1. Personnel					
2. Travel					
3. Consumables					
4. Maintenance					
5. Miscellaneous					
6. Overhead					
<b>Total</b>					

公可

Justifications (Use continuation pages if necessary):

Form Section 7-Other Support

Name of PI	Source of Support	Title of Support	Funding (in 1,000 NT\$)		Duration of Support	Overlap with this pplication
			Current	Total		

### Form Section 8 - Biographical Sketches

姓名		ID No. (身份証或護照字號)		
Name (in Print)		Date of Birth		
Signature		Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female	
Education				
Institution and Location		Degree	Year	Field of Study
1.				

## Research and Professional Experience



## **Publications during the past three years**

### **Original Papers**



\*: Correspondent Author

### **Patents**

### Form Section 9 – Certificate of Agreement for the Application

Title of Application	(in Chinese)		
	(in English)		
Applicant Organization	(in Chinese)		系／所／科
	(in English)		Department
Principal Investigator	姓名		職稱
	Name		Position Title
Entire Proposed Project Period	From _____ to _____ (Month) (Day) (Year) (Month) (Day) (Year)		
<p>Principal Investigator Assurance:</p> <p>The research proposed in this application has not been awarded any financial support by any funding agency. I am aware that any withholding, falsification, or misrepresentation of information could result in administrative actions such as the dismissal of an application or the suspension and/or termination of an award, as well as other possible punitive actions.</p> <p>Signature of Principal Investigator: _____ Date: _____</p> <p>Signature of the Head of Applicant Organization: _____</p> <p>Name : _____ (in print) Title : _____ Date : _____</p>			





## Form Section 10 - Checklist



# CHECKLIST

**Before sending the proposal to the NHRI, please check these following items:**

- ☐ Read the Guideline very carefully
- ☐ Use the NHRI application form to apply
- ☐ The qualifications for Principal Investigator, Collaborating Investigators, Investigators, and applicant organization must conform to the rules of application
- ☐ Title of application does not exceed 60 typewriter spaces (including the spaces between words and punctuation)
- ☐ Observe the page limits for each section
- ☐ Number pages consecutively at the right bottom throughout the application, do not use suffixes such as 3a, 3b or 3-1, 3-2 and so on
- ☐ Signature of Principal Investigator, official signature for applicant organization and signature of investigators in Form Section(s) 8 or/and 9
- ☐ The amount of each budget category is doubly checked and correct

**Typing instructions:**





☐ Single space

☐ Within the margins of limitation

☐ Standard font size (density is 10 to 12 points) and no more than 6 lines per vertical inch

☐ Black type

☐ Do not use photo-reduction

