**Application for Financial Assistance for Miscellaneous Research Activities**

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| **A. Applicant**  |
| Name: | Given name: |
| Department: Choose a department Other: Please specify  |
| Status: [ ]  Assistant Professor [ ]  Associate Professor [ ]  Full Professor  [ ]  Employed for less than 3 years |
| Email Address 🖂:  | 🕿:  |
| **B. Eligibility**  |
| Are you a chairholder?  | YES [ ]  NO [ ]  |
| Do you hold special research funds (FSR) the balance of which is equal or superior to the requested amount? | YES [ ]  NO [ ]  |
| Do you hold a professorship with research funds ? | YES [ ]  NO [ ]  |
| **If you answered Yes to one of these questions and have been a professor at HEC Montréal for more than three years, you are generally not eligible for the Financial Assistance for Miscellaneous Research Activities Grant.** |
| **C. Type of activity** |
|[ ]  Translation of research papers  |
|[ ]  Revision of research papers |
|[ ]  Submission or evaluation of research papers  |
|[ ]  Other research-related activities (specify) :  |
| **D. Activity** |
| Title of activity:  |
| Description of activity (e.g. objectives, importance, timeline) |
| *Objectives*: |
| *Importance*: |
| *Timeline*: |
| **E. Expected outcomes of the activity** |
| **F. Actual need for funding (taking into account any existing funds and their commitment)** |
| **G. Application**Amount requested:  $  |
| **Budget** |
| Description  | Amount |  |
|  |  |  $ |
|  |  |  $ |
|  |  |  $ |
|  |  |  $ |
|  |  |  $ |
| **TOTAL** |  | **$** |
| *1 Add lines to the budget if necessary.* |
| Budget justification |

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| **H. Outcomes of previous grants**Have you already received Financial Assistance for Miscellaneous Research Activities funding from HEC Montréal’s Research and Knowledge Transfer Office? NO ☐ YES ☐ |
| If yes, please list the outcomes from grants obtained over the last 5 years.  |
| Month/year obtained | Outcomes (Please enter the complete bibliographic record for each publication, if applicable.) |
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|  |  |
| Date of application: Enter today’s date |

Attach with application:

[ ]  The summary or complete paper to revise or translate.

[ ]  A copy of the estimate or bill for the translation or revision.

[ ]  Other documents; (specify):

The form and attachments must be sent to demande.recherche@hec.ca

Please allow at least 10 business days to process the application.