

Division of Palliative Care

Research and Scholarly Projects Fund 2023

Application Cover Sheet

Title of Project:

Principal Investigator Name:	
Email:	
Title:	
Primary Affiliation:	
Signature of Principal Investigator:	
Date:	

Co-Investigators:

Co-Investigator #1:	Name:
	Email:
	Title:
	Affiliation:
Co-Investigator #2:	Name:
	Email:
	Title:
	Affiliation:
Co-Investigator #3:	Name:
	Email:
	Title:
	Affiliation:

Note: Co-Investigator(s) do not need to sign this cover sheet.

Co-Investigator #4:	Name:
	Email:
	Title:
	Affiliation:
Co-Investigator #5:	Name:
	Email:
	Title:
	Affiliation:
Co-Investigator #6:	Name:
	Email:
	Title:
	Affiliation:
Co-Investigator #7:	Name:
	Email:
	Title:
	Affiliation:
Co-Investigator #8:	Name:
	Email:
	Title:
	Affiliation:

Note: Co-Investigator(s) do not need to sign this cover sheet.