**Island Centre POR Planning & Development / Research-to-Action Awards – Application Form**

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| **LEAD APPLICANT INFORMATION** |
| Name: |
| Title/Role: | Institution/Organization: |
| Contact Phone Number: | Email Address: |

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| **ISLAND HEALTH AFFILIATION** |
| [ ]  | Island Health employee or affiliated health professional |
| [ ]  | I am not applying as an Island Health employee or affiliated health professional |

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| **TITLE OF PROJECT OR AREA OF STUDY** |
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| **RELEVANT HEALTH SYSTEM PRIORITIES (CHECK ANY THAT APPLY)** |
| [ ]  | The COVID-19 pandemic and its associated implications for health |
| [ ]  | Substance use concerns, including responses to the opioid crisis |
| [ ]  | Cultural safety and humility/Indigenous health |
| [ ]  | Mental health and wellness |
| [ ]  | Seniors’ health/care transitions |

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| **STREAM APPLIED TO (CHOOSE ONE)** |
| [ ]  | Planning & Development Awards |
| [ ]  | Research-to-Action Awards  |