

## CALL FOR SCHOLARSHIP APPLICATIONS

## FOR RESEARCH IN PHYSIOTHERAPY AND ALLIED FIELDS

Rehabilitation research foundation is a trust founded by some of us who believe that research in physiotherapy and allied subjects requires encouragement and direction.

The objectives of the foundation are to:

## Promote evidence based practice, bring physiotherapy education on par with global standards and to promote research by tutoring, provision of seed money and a mentorship program

As a first step, we are glad to announce **10 awards** for unique research projects attempted by undergraduate and post graduate students. The grant is only meant as an encouragement and will not cover all costs. The grant will not support purchase of any equipment and the maximum amount awarded will **be Rs 10,000** per award.

Applications are invited in the following format from interested candidates. Applications which are not complete in all respects will not be considered. There is no last date for applications.

Awards will be announced on Nov and May 30th of every year.

All abstracts will be scrutinized and those that are promising will be shortlisted. Shortlisted applicants will be invited to submit complete proposals which will be peer reviewed by blinded reviewers. Reviewer comments will be intimated. If the applicant chooses not to consider the suggestions, the applications will not be considered for that round. However applicants may apply again. If reviewer comments are addressed satisfactorily, the application will be considered for the final round. The final grantees will be decided based on a rubric based scoring system by the final reviewers.

Please feel free to share this information with your physiotherapy colleagues

## PROFORMA FOR SCHOLARSHIP APPLICATION

(a) Candidate Details:	
Name of the applicant	:
Current position	·
Highest academic degree	
(Attach scanned copy)	:
Affiliated institution/s	:
(b) Project Details:	
Title of project:	
Fresh/ Re-apply:	
Abstract (250 words justifying the r	need and the methodology)

(c) Bu	dget:
Total b	udget of the project:
Other	sources of funding:
Amour	t requested from RRF:
(d) Eth	ical clearance:
	ional ethical clearance (Name of the committee):
ICF:	
Permis	sion from institution /hospital/ clinic:
(e) Att	achments to be submitted: checklist
1.	Institutional ethical clearance
2.	ICF
3.	Permission from institution /hospital/ clinic
4.	If using questionnaires/ scales (Permission to use from the original developer)
5.	Bona fide certificate from the college/ employer, if self-employed then a declaration to that effect.
6.	Permission from the institute from where the data would be collected

Send your completed application to rehabresearchfoundation@gmail.com