

### **Age-Friendly University Project Grants Program**

### Instructions

Before completing this form, applicants should read the Age-Friendly University (AFU) Project Grants Program Guidelines.

The completed and signed application form must be submitted online.

Applications are due by 4:00 P.M. on November 3, 2025.

Project Title:			
<b>Amount Requested (M</b>	aximum \$40,000):		
Principal Applicant:			
First Name:			
Last Name:			
UCID:			
Job Title:			
Faculty:			
Department/Unit:			
Department ID:			
Email:			
Phone:			

Please indicate which of the following eligibility criteria you meet to hold project funds at UCalgary:

You hold an academic appointment

You are in a management role at level M1 or higher

You are in a professional role at level P3 or higher

You are in a research role at level R3 or higher

You are in a technical professional role at level T3 or higher



## **Age-Friendly University Project Grants Program**

Co-Applicants: (Please list all co-applicants below)

First Name	Last Name	Faculty	Department/Unit	Organization	Email
					-



Project Summary:
Provide a brief lay summary of your project. This description will be shared with the campus community and the public to communicate the purpose and impact of projects funded through this program. (Maximum 200 words)

### **Project Description:**

Using the space provided, describe your project in detail. Ensure your description addresses the following key considerations, as outlined in the Guidelines document:

- Connection to one or more of the ten guiding principles of an AFU
- Integration of equity, diversity, inclusion, and accessibility principles
- · Collaboration with other faculties, departments, and/or administrative units
- Innovation in concept and approach
- Feasibility of implementing planned activities and achieving intended outcomes
- Clear evaluation metrics and methods to measure success

Potential impact of the project and long-term sustainability

Project Description (Continued)		

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Project Timeline:
Using the space provided, outline the key activities and milestones planned for your project. Bullet points are acceptable.

Project Team:
Using the space provided, describe the team's relevant experience and expertise that will enable successful completion of the project.



## **Age-Friendly University Project Grants Program**

## **Requested Funding**

Please estimate and enter the amounts for each applicable budget item below.

Amount (\$)	Expense Type		Description
	Undergraduate Student		
	Graduate Student	Trainees	
	Postdoctoral Associate		
	Other Personnel	-	
	Materials and Supplies		
	Room Bookings		
	Catering		
	AV	Meeting Costs	
	Facilitator	Costs	
	Other Costs		
	Research equipment		
	Travel (for research or collaboration only)		
	Honoraria		
	Other item (provide descript	Other item (provide description)	
	Other item (provide description)		
	Other item (provide description)		
	Other item (provide description)		
	Total Amount Requested		

Budget Justification
Please provide a clear justification for the budget items.

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### **Age-Friendly University Project Grants Program**

### **Certifications and Special Requirements**

Please indicate which certifications are required for the proposed work, including the status of the application and certificate number (if known).

Human Participants (REB)	Required:		REB #:	
Animal Care (ACC)	Required:		ACC #:	
Biosafety	Required:		Biosafety #:	
Special Requirements	Additional Spac	e:	Yes	No
	Course Release	Time:	Yes	No
	Faculty/Dept Co	ontributions:	Yes	No

### For Research Projects:

### **Application Status:**

Approved

Under review

Not Yet Submitted

## For Non-Research Projects:

### REB Exemption (for quality assurance or quality improvement projects):

Required

Not Required

### **Application Status:**

Approved

Under review

Not Yet Submitted

## **Application Approval Signatures**

Signatures indicate approval of the proposed project and agreement to any requirements outlined in the application. Electronic signatures are acceptable.

For additional information o	n signatures:	
https://research.ucalgary.ca	a/conduct-research/funding/signat	tures
Principal Applicant		
Printed Name	Signature:	Date:
Department Head (or equivery)	/alant): Signature:	Date:
Timed Name	oignature.	Date.
Associate Dean (Research	)/Dean (or equivalent):	'
Printed Name	Signature:	Date:



### **Age-Friendly University Project Grants Program**

### **Contact Information**

Questions about the AFU Project Grants Program or the application process should be directed to the Centre on Aging.

Centre on Aging, University of Calgary GD01, Cal Wenzel Precision Health Building 3280 Hospital Drive NW Calgary, AB T2N 4Z6

Email: aging@ucalgary.ca

Phone: (403) 210-7208