

# Application: SOF-0000000081

Brandon Schlichter - brandon@researchnb.ca  
Strategic Opportunities Fund

## Summary

ID: SOF-0000000081

## SOF - Application Form

Incomplete

# Strategic Opportunities Fund - Application Form

Please report all dollar values in Canadian dollars.

### SECTION A – BASIC INFORMATION

Title of Project:	(No response)
Principal Investigator (PI) First Name:	(No response)
PI Last Name:	(No response)
Researcher website (if applicable):	(No response)
Organization:	(No response)
PI e-mail address	(No response)

### Anticipated Project Start Date

Please provide this date as it will be used to calculate the award start date in your notice of decision. This date can be amended once a funding decision has been reached.

(No response)

## Language of Correspondence

Please select your preferred language of correspondence.

(No response)

## SECTION B – PROJECT DESCRIPTION

**Executive Summary (250 words):**

(No response)

**Description of the strategic opportunity funding that is being leveraged (250 words):**

(No response)

**Training opportunities for junior researchers/students in this project (250 words):**

(No response)

**Expected benefits to New Brunswick and why they are significant (250 words):**

(No response)

**Plan for knowledge transfer / technology transfer (250 words) :**

(No response)

**Plan for peer review of this project, or peer review results if one has already been carried out (100 words):**

(No response)

**Research partners involved outside of the Principal Investigator's team (150 words):**

(No response)

**What is the involvement of non-academic partners in this research project, such as industry? Please address if there are partners or potential partners, and if the program addresses a demonstrated need (150 words):**

(No response)

**Capacity of the PI and research team to execute this project (150 words max):**

(No response)

**SECTION C – Financials**

### Project Budget Table 1

Please indicate the item/expense you are purchasing, the source or vendor supplying it, the cost and select the type of expense from the dropdown menu.

	Item/Expense	Source	Cost (CAD)	Type of Expense
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

### Budget Justification:

Use this field if there are items you will purchase that might require further explanation of their relevance to the project.

(No response)

Add more budget items?

No Responses Selected

**Requested contribution from ResearchNB:**

(No response)

**Matching Funding Sources Table 1:**

In this table, please report the matching funds that you have secured or requested from other funders. Funding from your research institution should be classified as 'other'. ResearchNB has different leveraging ratios for our funds and require this information to confirm your project meets those criteria. Please see the program description page for these ratios.

	Name of Funding Source	Source of Funds	Requested or Secured	Cash Contribution Amount	In-kind Contribution Amount
1					
2					
3					
4					
5					

**Please describe the matching funds sources (if necessary).**

Reasons for further explanation needed: if you are leveraging only a certain portion of a federal award or a industry partner is providing both cash and in-kind contributions, these may need to be explained further.

(No response)

**Add more funding sources?**

**No Responses Selected**