Français   Logout

Grand Challenges Canada™
Grands Défis Canada™
BOLD IDEAS FOR HUMANITY.™

Stars in Global Health
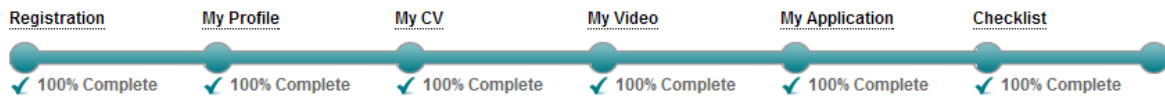Round 7 Application Site

My Details | My Profile & CV | My Video | My Application | Checklist & Submission | Info | Help

Your Application Completeness   **Application ID: 6692**

Registration | My Profile | My CV | My Video | My Application | Checklist

✓ 100% Complete | ✓ 100% Complete | ✓ 100% Complete | ✓ 100% Complete | ✓ 100% Complete | ✓ 100% Complete

*denotes a required field   Save Changes   Next

Información del solicitante:

Primer Nombre: *

Segundo nombre:

Apellido: *

Título: Select a title... ▼

Select a title...
Dr.
Prof.
Mr.
Ms.
Mrs.

Correo electrónico Principal: *

Correo electrónico alternativo:

Teléfono de contacto: *

☐ This number is a cellphone

Institución / Organización Principal: *

País de la Institución / Organización Principal:

Tenga en cuenta que al cambiar el país, los criterios de elegibilidad también pueden cambiar. Consulte la Solicitud de Propuestas para más detalles.

Dirección postal Oficial de la Institución / Organización Principal: *

Dirección: *
Teléfono de contacto de la Institución / Organización Principal: *

Ciudad:
País: *
Tipo de institución:

Select an institution type... ▼
Select an institution type...
Academic
For-profit
Government
Hospital
NGO
Research Institute
Other

Página web oficial de la Institución/Organización Principal:

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------------------------FINAL DE LA PÁGINA UNO -----------------------

Su perfil de aplicación:

1. ¿Cuál es su más alta calificación académica? *

☐ PhD   ☐ Masters
☐ Bachelors   ☐ Associate/Diploma
☐ No graduate degree / in progress
☐ Others
☑ Professional degree

Professional degree - please specify

2. ¿Campo de estudio de su más alta calificación académica? *

3. ¿Fecha de expedición de su más alta calificación académica? *

4. Nombre y afiliación de su país colaborador de bajos o medianos ingresos (Los postulantes de Canadá deben tener un colaborador en un país de bajos o medianos ingresos elegible.)

Collaborator Details
Applicants from Canada must have a collaborator in an eligible low- or middle-income country.

Name of low- or middle-income country collaborator: (first name, middle, last name)

| first name | middle | last name |

Title of low- or middle-income country collaborator:

Affiliated institution of low- or middle-income country collaborator:

Address of Collaborator:

Address:

City:

Country:

5. Por favor, introduzca su CV a continuación. Tenga en cuenta el límite de 6,000 caracteres, que es aproximadamente 2 páginas.

El CV debe mostrar específicamente al solicitante principal. *

Maximum response allowed is 6000 characters

You have 6000 characters left (includes line breaks).

☐ **I certify that all information provided is true ***

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------------------------FINAL DE LA PÁGINA DOS ----------------------

Su video

You have no video attached to your application.
To upload, please use the upload form below.

To facilitate a smooth application process, we recommend uploading your video at least 1 week before the application deadline.

▼ Please upload your video. You can submit your video in either English or French or both. The video must not exceed two minutes; any videos that are longer than 2 minutes will be truncated at the 2 minute mark.
We will put the videos on a public website.

Your Video Title*

Please give your video a short and concise title.

🎞 Upload New File

Choose file to upload

Browse...

Accepted formats: .mov, .mpg, .mp4, .m4v, .flv, .wmv
Maximum upload file size: 75Mb

Once you have started a file upload, please do not browse away from this page until the upload is finished.

*Please note that even files saved with the extensions listed above may contain data that cannot be encoded correctly. In case of an error, please refer to the following examples of video conversion sites to resave your original file into the accepted formats.

🖼 Current Uploaded File

No file uploaded.

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------------------------FINAL DE LA PÁGINA TRES ----------------------

Título de su solicitud (Esta información se hará pública) *

1. **Sírvase proporcionar un resumen de su proyecto.**

Los revisores de Grand Challenges Canada sólo examinarán este párrafo de resumen del proyecto para decidir si las solicitudes pasan a la siguiente etapa de evaluación. Por lo tanto, es fundamental tener claro por qué su aplicación es audaz, creativa e innovadora en el párrafo de resumen. Su párrafo de resumen debe incluir una breve introducción y la justificación de la propuesta. Debe contener el problema o desafío de desarrollo, la solución propuesta, cómo se integra la innovación integrada, por qué cree que tendrá éxito y por qué va a ser sostenible. Incluya un resumen del plan que haya diseñado para resolver el problema. * (1500 caracteres como máximo, incluyendo saltos de línea)

2. Describa y cuantifique el problema de salud global que abordará. * (400 caracteres como máximo, incluyendo saltos de línea)

3. ¿Por qué su idea es no convencional o creativa? ¿Cómo esta es una mejora con respecto a los enfoques actuales? ¿Cómo se diferencia de los proyectos financiados anteriormente por Grand Challenges encontrados en **http://www.grandchallenges.ca/our-grantees/.** (Tenga en cuenta que las propuestas muy similares a financiadas anteriormente no serán vistas favorablemente.) * (700 caracteres como máximo, incluyendo saltos de línea)

4. Describa en detalle cómo hará que su idea funcione. Resalte la base de su idea (lo que va a hacer, cómo va a hacerlo, por qué lo está haciendo, dónde va a hacerlo y quiénes estarán involucrados). Incluya metodología y nuevas tecnologías, modelos / enfoques o políticas a desarrollar. Aunque no es necesario, se pueden incluir referencias a otras publicaciones para justificar su enfoque. * (2000 caracteres como máximo, incluyendo saltos de línea)

5. ¿Cómo integra su idea la innovación científica / tecnológica, social y empresarial - Innovación Integrada (ver ficha de Información)? Por ejemplo, si su idea se basa en un desarrollo tecnológico y científico, por favor explique su plan para hacer frente a los aspectos sociales y de negocios que se requieren para llevar esta innovación a escala (por ejemplo, la planificación empresarial, la participación comunitaria, el compromiso responsable de las políticas, entender la demanda de usuario, la distribución, la integración dentro de las plataformas existentes, etc.) * (300 caracteres como máximo, incluyendo los saltos de línea)

6. Describa las actividades con sus costos asociados y distribúyalos en un plazo de 12-18 meses del proyecto asignado para la subvención de la fase inicial I. Por favor dé una justificación detallada de la categoría de presupuesto, incluyendo el nivel de esfuerzo del personal del proyecto, tarifas y costos de los componentes. Por favor refiérase a la Sección 4.6 de Solicitud de Propuestas para las descripciones. Categorías presupuestarias no deben superar los costes autorizados por categoría que se enumeran a continuación. Presupuesto total no debe superar los CAD100,000 de costes directos y CAD12,000 indirectos para un total máximo de CAD112,000. *

Category	Amount ($ CAD)	Duration (No. months)	Description of Activities
Personnel (Direct FTE Costs) Max 40,000 CAD	0	0	
Travel (Direct Travel Costs) Max 10,000 CAD	0	0	
Consultants (Direct Consulting Costs) Max 20,000 CAD	0	0	
Direct Supplies and Services (Direct Supplies) Max 30,000 CAD	0	0	
Equipment (Direct Equipment) Max 30,000 CAD	0	0	
Other Research (Direct Research) Max 25,000 CAD	0	0	
Sub-grants and Sub-contracts (Direct) Max 25,000 CAD	0	0	
Total Direct Cost Budget Max $100,000 CAD	0		
In-direct costs Max 12,000 CAD	0	0	

Budget should total $112,000. See Budget Definitions for details.

[FW1]

7. Resultados previstos: Por favor complete al máximo de su capacidad los resultados que usted anticipa que logrará al final del período de 12 o 18 meses. Dejar en blanco si no es aplicable. *

Outputs

Specific and significant results from your project activities that will not have a direct impact on health outcomes

Indicator	# / %	Narrative (max 100 char)
# of innovative prototypes and / or service delivery models developed		You have 100 characters left (includes line breaks).
# of policy recommendations developed		You have 100 characters left (includes line breaks).
# of public awareness outputs (videos, news releases, radio shows, etc.) developed		You have 100 characters left (includes line breaks).
# of curriculum changes recommended		You have 100 characters left (includes line breaks).
# of statistical models developed		You have 100 characters left (includes line breaks).

# of patents filed		
		You have 100 characters left (includes line breaks).
# of papers published		
		You have 100 characters left (includes line breaks).
# of analytical models developed		
		You have 100 characters left (includes line breaks).
$ Funds leveraged		
		You have 100 characters left (includes line breaks).
# of total members of project team		
		You have 100 characters left (includes line breaks).
# of total members of project team in LMIC		
		You have 100 characters left (includes line breaks).

Intermediate Outcome(s)

Articulate measurable changes or intended results that directly impact people (beneficiaries, intermediaries/providers) as a result of the project activities during the lifetime of the grant. Intermediate outcomes should define what will change and who will benefit, and be an indicator of progress towards the ultimate outcome.

- BENEFICIARIES are those whose lives are ultimately being saved and/or improved.
- INTERMEDIARIES/PROVIDERS are those who influence health outcomes of beneficiaries.

Indicator	# / %	Narrative (max 100 char)
Changes in percent of BENEFICIARIES who accessed products or service delivery models (x% to y%)		You have 100 characters left (includes line breaks).
# of BENEFICIARIES who accessed innovative products and / or service delivery models		You have 100 characters left (includes line breaks).
Changes in improved knowledge, attitudes or behaviours of BENEFICIARIES (x% to y%)		You have 100 characters left (includes line breaks).
Change in percentage (x% to y%) of INTERMEDIARIES/PROVIDERS with improved knowledge, attitudes or behaviours		You have 100 characters left (includes line breaks).
Changes in percent of INTERMEDIARIES/PROVIDERS with increased training or skills (x% to y%)		You have 100 characters left (includes line breaks).

Change in percentage (x% to y%) of people reached through awareness-building outputs

You have 100 characters left (includes line breaks).

# of policies adopted

You have 100 characters left (includes line breaks).

# of people reached through awareness outputs

You have 100 characters left (includes line breaks).

Ultimate Outcome

Articulate the highest level change in lives saved or improved that can reasonably be attributed to the project in a causal manner within the lifetime of the grant. Outcomes should define what will change and who will benefit.

Indicator	# / %	Narrative (max 100 char)
Changes in percent of people with improved health outcomes (x% to y%)		

You have 100 characters left (includes line breaks).

# of people with improved health outcomes

You have 100 characters left (includes line breaks).

8. Sírvase indicar los países en los que implementará su proyecto durante el período de 12 o 18 meses. Seleccione todas las que apliquen. *

9. Fase II - Escala de innovaciones a través de asociaciones

Si va a aplicar a la Fase II, y suponiendo que usted tiene éxito, ¿cómo escalará su innovación y quién sería el socio adecuado para trabajar? ¿Ya ha identificado un socio que le ayude a financiar y apoyar la ampliación de la innovación? de ser así, indique quién. Si aún no cuenta con un socio, por favor indique (marcando la casilla correspondiente) el tipo de socio que consideraría para la fase II.

- ● Social Angel Investors
- ○ Foundations/NGO's
- ○ Companies
- ○ Development/Donor Agencies
- ○ Developing Country Governments
- ○ Others (please name)
- ○ None (please explain)

Maximum response allowed is 700 characters

You have 700 characters left (includes line breaks).

10. Descripción de otro financiamiento de Grand Challenges Canada

If you currently hold or have previously held a Grand Challenges Canada grant, clearly indicate how this proposal differs from the grant(s) awarded.

Maximum response allowed is 250 characters

You have 250 characters left (includes line breaks).
Grant ID's:

Categorías*[FW2]

Health Priority

☐ **Food and Nutrition**
   ☐ Food fortification
   ☐ Food safety
   ☐ Food Security

☐ **Infectious Diseases**
   ☐ Enteric pathogens
   ☐ Hepatitis
   ☐ HIV
   ☐ Haemophilus influenzae
   ☐ Haemorrhagic fever
   ☐ Malaria
   ☐ Neglected tropical diseases

- ☐ Poliomyelitis
- ☐ Pneumonia
- ☐ Sexually Transmitted Infections (STI), except HIV
- ☐ Tuberculosis
- ☐ Tetanus
- ☐ Other

☐ **Injuries**
- ☐ Road Traffic Accidents
- ☐ Other

☐ **Women's and Children's Health**

☐ **Global Mental Health**

☐ **Non-Communicable Diseases**
- ☐ Diabetes
- ☐ Cancer
- ☐ Cardiovascular Diseases
- ☐ Chronic Respiratory Diseases
- ☐ Neurological Disorders
- ☐ Physical Disability

☐ **Water and Sanitation**
- ☐ Sanitation facilities
- ☐ Waste Management

☐ **Other**

Health Platforms

- [ ] Diagnostics
- [ ] Drug
- [ ] Information and Communications Technology
- [ ] Medical Devices/Equipment
- [ ] Health Education Programs
- [ ] New Models in Health Care Delivery/Health Systems
- [ ] Vaccine
- [ ] Other

------------------------FINAL DE LA PÁGINA CUATRO ----------------------

LISTA DE VERIFICACIÓN: [FW3]

Step 1 ✗ Registration Completed

- Please enter your Title
- Please enter your Contact Phone Number
- Please enter the contact phone number of your Primary Institution/Organization
- Please enter the address of your Primary Institution/Organization
- Please enter the country of your Primary Institution/Organization
- Please enter the Primary Institution/Organization Institution Type

Step 2 ✗ Completed My Profile

- Please enter your which degrees you hold
- Please enter your the field of study of your latest relevant degree
- Please enter the name of low- or middle-income country collaborator
- Please enter the title of low- or middle-income country collaborator
- Please enter the affiliated institution of low- or middle-income country collaborator
- You must certify that all information provided is true

Step 3 ✗ Uploaded my Video

- You have no video attached to your application.
  To facilitate a smooth application process, we recommend uploading your video at least 1 week before the application deadline.
- Your video title is incomplete.

Step 4 ✗ Uploaded My CV

- Please enter your CV (Question 7 of Your Profile)

Step 5 ✗ Completed My Application

- Please enter a title for your application
- Please complete question 1
- Please complete question 2
- Please complete question 3
- Please complete question 4
- Please complete question 5
- Your budgeted direct costs must be greater than $5,000 CAD and less than $100,000 CAD
- Please indicate the countries in which you would be implementing your project during the 12 or 18 month period
- Please indicate Phase II category
- Please describe your Phase II partnership
- Please enter Health Priority or Platform Categories

Step 6 ✗ Agreed to the Institutional Sign Off & Terms and Conditions

Institutional Sign Off*

☐ I confirm that an appropriate decision maker with grant/contract signing authority at the organization at which I am based, and where the grant funds will be sent if I am successful, (i.e. my university, company, etc.), has reviewed my application and is supportive of it.

Signing Authority

Salutation:

[Dr. ▾]

Name:

[first name ⬆] [middle] [last name]

Official Title/Position:

[   ]

Official Phone Number:

[   ]

Official Email:

[   ]

[Save]

Terms and Conditions*

Before submitting your proposal, please review the following Terms and Conditions and acknowledge your acceptance by checking the box marked "I accept". Note that all eligible video submissions (along with the applicant's name and institution/organization) or visual representation will be posted online for public review, voting and comment.

****

Grand Challenges Canada ("GCC")
Stars in Global Health Program (the "Program")

☐ I Accept

Step 7 ✗ Final Submission

Please note that the submit button will show when all parts of your checklist are complete.
All submissions are final and you will no longer be able to edit your application once you have pushed submit.

Please click Preview to view and print a copy for your records.

You can print your application at any time up until the Applications closing date of Tuesday February 11, 2014 at 3:00 p.m. EST.

[Preview / Print]   [Previous]