



2018 ATCN Fund Application



Quarterly (January 1, April 1, July 1, October 1) **Maximum Award per application for 2018: \$ 2,500.00**

(The number of applications funded during each yearly cycle will vary based on available funds and application reviews)

Important Application Information

1. All documents must be submitted as an MS-Word document.
2. Font size 11 or larger.
3. 1" margins on top/bottom and sides.
4. Pages numbered and sentences double spaced.
5. ALL applications must be submitted electronically as an email attachment to either Jan Howard or Mike Glenn. Please contact Jan or Mike to make any alternative submission arrangements.
6. Questions regarding applying for the ATCN Fund should be directed to
 - a. (US Applicants) Jan Howard, ATCN Chair jchoward825@gmail.com
 - b. (International Applicants) Mike Glenn, ATCN International Director maglenn@uw.edu

Applicant Contact Information (required)

ATCN Fund Project Title	
First Name	
Last Name	
Professional Credentials	
Job Title	
Facility or Institution name	
Email address	
Phone number	
Address 1	
Address 2	
Address 3	
City	
State/Province	
Country	
Zip/Postal Code	

ATCN Fund Application Sections

All ATCN Fund applications must submit information for the following 5 sections. Incomplete applications will not be reviewed

I. Proposal Summary (Executive Summary)

The Proposal Summary should be about one paragraph and should include the amount of funding requested and give the most general description of the use that will be made of the funds.

II. Organization Description and History

The Organization Description and History section should be about 1-2 paragraphs in length and should include a summary of the type and number of trauma nursing educational programs offered in your geographic region and the support that your facility will be able to provide to the ATCN program (administrative, financial, environmental /space, equipment, etc.)

III. Project Description (Program Narrative)

The Project Description should be no longer than 2 pages and give a detailed description of how the ATCN grant funds will be used. It should also explain how the remaining costs for the inaugural program will be covered and any other sources of income to support the ATCN program start up. In addition to the startup program, include an assessment of how your facility will sustain the ATCN program over time, how many ATCN courses you plan to conduct each year and how many potential students do you hope to reach each year

IV. Project Timeline/Budget Timeline

Using your Project Description, provide a timeline that shows the chronological order in which the activities undertaken to start an ATCN program will be completed. Also include information about how/when funds that are awarded will be spent to support each activity.

V. Budget

Provide a detailed budget that shows all of the expenses and revenues for this project. The budget should clearly show what the currently available funds and proposed ATCN Grant funds will be used for. Provide a table with categories of expenditures that will be funded by the requested grant, how much funding will be required for each category, and how much of that funding will come from the grant request.

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