

## Dartmouth-Hitchcock Student Nurse Scholarly Project Application

All students in **RN to BSN** programs and **graduate** programs must use this form to obtain approval for any scholarly projects. Please submit this form to the Director of Nursing Research at least one week prior to setting up appointment with the director to review the project/study. All scholarly projects/studies must be reviewed.

Student name: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

D-H employee? \_\_\_\_\_ yes \_\_\_\_\_ no

D-H department: \_\_\_\_\_

Is this part of a larger D-H project/study?  Yes  No

If yes please provide:

The topic/subject: \_\_\_\_\_

Leader name(s): \_\_\_\_\_

Will this involve obtaining data from the electronic medical record (eD-H)?  Yes  No

If yes, what type of data will be obtained? \_\_\_\_\_

Name of educational institution: \_\_\_\_\_ Current Contract with your institution \_\_\_\_\_ y \_\_\_\_\_ n

City: \_\_\_\_\_ State: \_\_\_\_\_

Degree program: \_\_\_\_\_

Class format (traditional classroom, online, hybrid, other): \_\_\_\_\_

Name of primary faculty advisor: \_\_\_\_\_

Faculty advisor phone: \_\_\_\_\_

Faculty advisor email: \_\_\_\_\_

Proposed Project/Study: \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_

Location/organization: \_\_\_\_\_

Mentor: \_\_\_\_\_

Is this research? \_\_\_\_\_ yes \_\_\_\_\_ no

If yes have you completed training in the protection of human subjects? \_\_\_\_\_ yes \_\_\_\_\_ no

## **Abstract**

### ***Complete the abstract in a word document and attach to the application***

**Background:** *Provide a brief summary of current knowledge on the topic. The abstract should at least summarize the objectives of the project, the procedures to be used, the nature of the data to be obtained, and how participant privacy will be protected or confidentiality of data will be maintained.*

**Project/ Research Question:** *State precisely the primary question and any secondary questions that the study of the intervention is designed to answer.*

#### **Design:**

**Method:** *(e.g. Qualitative, quantitative, or mixed) instruments developed for this project? Describe validity and reliability of assessment instruments to be used.*

**Study design:** *(e.g. Observational, quasi-experimental and experimental)*

**Analysis:** *What is your plan for analysis?*

**Protection of Participants/ Ethics:** *Describe how participant privacy will be protected and how data will be maintained?*

**Funding:** *List any internal or external funding for the project*

**Dissemination:** *Plan for type (poster, podium, manuscript) and location (local, regional, national)*

## **Please attach your class syllabus**

Please contact the Center for Nursing Excellence at (603) 650-8008 with questions