

EPC 2025 Online Application Question Overview

This is an application for:

- General EPC Grant request (Up to \$5,000)
- Broad Impact EPC Grant request (Up to \$40,000)

Title of your EPC Grant

Brief description of your project.

How will this project enhance patient or resident care delivery?

How many people/patients/residents do you estimate will benefit from this request?

Which departments/divisions/areas/sites will this request impact?

Specific to Broad Impact Grants: What other departments/divisions/sites are involved with and will benefit from this project?

Detailed Budget

Amount requested must be in Canadian dollars (including all taxes and fees); EPC Grant committee will not consider grant requests over \$5,000, unless you are applying for the Broad Impact EPC Grant.

- Item #1 Description
- Item #1 Cost
- Item #2 Description
- Item #2 Cost
- Item #3 Description
- Item #3 Cost
- Item #4 Description
- Item #4 Cost
- PST
- GST
- Shipping
- Total
- Additional Budget – Comments

Are you able to complete all purchases associated with this request by June 30, 2025?

- Yes
- No

One of our funding sources requires purchases to be completed by November 30th, 2024. Are you able to complete purchases associated with this request by November 30th, 2024?

- Yes
- No

Are there other funding sources available for this request?

If there are ongoing costs, who will be covering these costs (which hospital Department or Site)? (25 words max)

PHC/PL Cost Centre # to be reimbursed - if funding is approved

Is this the only EPC Grant application your department will be submitting?

- Yes
- No

Please rank the priority of this grant application compared to other grant applications in your department.

Project Confirmation

- As Project Lead, I confirm I have received approval for this request.
- As Project Lead, I confirm that I will meet all reporting requirements.

Name of the Project Lead confirming the above statement

Email address of the Project Lead confirming the above statement

Name of Dept. or Division Head/ Program Director/ Site Leader

Email of Dept. or Division Head/Program Director/Site Leader

Supporting documentation (optional)