

Nursing Evidence-Based Practice Project Proposal Interest Form

Project Lead Full Name and Nursing Credentials:	Phone Number:
Facility/ Unit:	Project Lead Computing ID #:
Project Type (i.e., EBP or Quality Improvement:	
Project Title:	

EBP and QI Project Proposal Template

**Please delete instructions before submitting.*

Brief Summary of your topic (250-400 words):

1) Objectives of your project

2) Background

3) Setting of the Project

4) State your PICOT question for EBP. (Population, Intervention, Comparison, Outcome, Time). If your project is just QI, write "NA"

5) Population of interest

6) Intervention plan

7) What is the current practice and how do you plan on changing the current practice?

8) What outcome do you plan to accomplish?

9) Breakdown the timeline of your project.

10) References In APA format.



Attestation Agreement

*"I, hereby attest, that this information is true, accurate, and complete to the best of my knowledge
and confirm that _____ was the
_____ on the EBP and/or Quality Improvement Project for UVA Community Health. I
confirm that prior to the implementation of the project, I obtained my leader's permission to move forward
and present it to the Innovation and Research Council. The expected completion date for the project is
_____. Duties to be completed are _____."*

Printed Name of Project Leader

Signature of Project Leader

Date Signed

Printed Name of Department Leader

Signature of Department Leader

Date Signed