



HRCI/HRB Joint Funding Scheme 2022

PART B1

Application form

IMPORTANT INSTRUCTIONS

Please fill in the application form with reference to the Applicant Guidance Notes. These contain more detailed explanations of the type of information expected under each question.

- **The final file size of the application form must be a maximum of 2MB. Supporting figures, Gantt chart, and other associated documents (e.g. signature page) must not be embedded in the main 'application' document but provided as separate files.
- **Any <u>figures</u> to support the project description must be provided in a <u>single additional document</u> up to a maximum file size of 2MB.
- **The Gantt chart should be provided as a separate file with a maximum file size of 2MB.

Please use font Calibri, size 11

PROJECT TITLE (maximum 20 words):

Section 1: DETAILS OF PI AND	CO-APPLICANTS
1.1 Principal Investigator deta	ls:
Name:	
Title/position:	
Department or equivalent:	
Name of Institution:	
Address:	
Tel number:	
Mohile number:	

Email address:

1.2 Co-Applicant details:

Details of all Co-Applicants associated with this research proposal should be listed.

<u>Note:</u> For additional co-applicants please copy and paste table as necessary (up to a maximum of 5 Co-Applicants can be listed).

Co-Applicant 1	
Name:	
Title/position:	
Department or equivalent:	
Name of Institution:	
Address:	
Tel number:	
Email address:	

1.3 Host Institution for the award

Please list the Host Institution for this award, i.e. the institution to which the research award will be made. Provide details of the Dean of Research/CEO/equivalent authorised person of that institution. Please note that the HRB has introduced a new Host Institution Policy with effect of 1 July 2015. Research performing organisations wishing to submit an application need to comply with the new policy.

A list of these Host Institutions recognised by the HRB at the time of this call going live is included as a PDF and can be downloaded by clicking here.

For international Host Institutions, an additional Warrant for International Hosts Form needs to be signed (Part C3)

Name of research	
institution:	
Address:	
Contact person (Dean of	
Research/ CEO/ Equivalent	
authorised personnel of	
institution):	
Title/position:	
Tel number:	
Fmail address:	

Section 2: PROJECT DESCRIPTION

2.1 Project Lay Summary

Please provide a plain English summary such that it is clear, easy to understand, and is easily accessible to a **broad lay audience** (maximum <u>300 words</u>).

2.2 Project Abstract of research proposal (maximum <u>300 words</u>).
2.3 Relevance of research to strategic aims of the charity or charities (maximum 300 words) Please set out the relevance of your application in addressing the strategic aims of the charity or charities (in the case that two charities are co-funding) and why the charity/charities should selectly your application to bring forward to the HRCI/HRB-jointly nominated selection committee. Where available, refer specifically to the strategic plan of the charity/charities you apply to, and to any other relevant strategy documents (maximum 300 words).
2.4 Keywords
Please list up to five keywords that specifically describe your area of research.

2.5 Project Description

The Project Description* should include the following:

- Research Question
- Current knowledge and background to the area of the proposed research.
- Overall Aim
- Objectives and Deliverables (including Gantt chart or alternative)
- Research Design and Methodological approach
- Project Management
- Public and Patient and Carer involvement in the research
- Gender and/or sex issues in the research project
- Impact Statement
- Biobanking
- Potential Risks and Ethical Concerns
- FAIR data management and stewardship
- Dissemination and Knowledge Exchange Plan
- IP Considerations

Please ensure that your application is focused, and that sufficient evidence is provided to enable the international peer reviewers and grant selection panel to reach a considered judgement as to the quality of your research application, its significance and its feasibility.

*Any figures to support the project description must be provided in a single additional document

up to a maximum file size of 2MB. 2.5a Research Question (maximum 50 words). 2.5b Current knowledge and background to the area of the proposed research (maximum 1200 words). 2.5c Overall Aim (maximum 100 words). Objectives and deliverables (maximum 60 words for each objective and 150 for deliverables). Please add at least 3 individual objectives. Objectives should be SMART (specific, measurable, achievable, realistic and time-bound). For each objective please list a subset of deliverables which will be used to measure progress. Note that the stated objectives and deliverables will be used to monitor progress throughout the lifetime of the award. Timelines should be set against objectives/deliverables in your Gantt chart. Objective 1 and associated deliverables

You must provide a Gantt chart which lists the above objectives and deliverables against the estimated timelines for completion, together with any additional milestones/key dates (e.g. PhD

Objective 2 and associated deliverables

Objective 3 and associated deliverables

submission) and roles and responsibilities of the Principal Investigator team etc. Please note that the preparation and submission of Data Management Plans should also be added as deliverables/milestones of the Programme. The Gantt chart should be provided as a separate file with a <u>maximum file size of 2MB</u>.

2.5d Research Design and Methodological Approach (maximum 4500 words)		
Please review the Applicant Guidance notes carefully for the details required in this section		
as an iteration of the proposed research been submitted to any HRB award scheme in the	ne las	
es□		
o 🗆		
If yes) Include the award scheme and year of previous submission in your answer below. Ilease briefly describe the changes that have been made to the application. Have the ecommendations from the previous peer, panel, or public review you received influenced hanges you have made? The word limit is 300 words.	the	
Ea Draiget Managament (maximum 600 words)		
.5e Project Management (maximum <u>600 words</u>).		
.5f Public and Patient and Carer Involvement in the Research Project (maximum <u>600 wo</u>	<u>rds</u>).	
nportant: The PPI section needs to be written as a plain English summary such that it is cle	ar, e	
o understand, and is easily accessible to a lay audience. If No: please explain why PPI is no	ot	
elevant to your project.		
5g Gender and/or sex issues in the research project (maximum 400 words).		
og dender and or sex issues in the research project (maximum 400 words).		

Are there potential sex (biological) considerations for this research?

Are there potential gender (socio-cultural) considerations for this research?

If so, outline how sex and/or gender analysis will be integrated in the design, implementation, evaluation, interpretation, and dissemination of the results of the research application. If not, you must clearly demonstrate why it is not relevant to the research application; have you
done a literature search to confirm this?
2.5h Impact Statement (maximum 400 words).
2.5i Biobanking
Does your application include an element of biobanking?
Yes□
No □
If Yes, you must submit a completed Infrastructure Agreement form: Form C2 with details of the
<u>biobank.</u>
If Yes, you must submit a completed Infrastructure Agreement form with details of the biobank.
Please describe how you will ensure good practice for biobanking components in this project, with
particular regard to quality of sample collection, processing, annotation and storage. Please
reference relevant guidelines/standards you will use. Where material will be obtained or stored for a future research purpose, or where you will use material previously obtained for another purpose,
please refer to the Instructions to Applicants July 2021 Page 24 latest Recommendation of the
Council of Europe. See Appendix II of Instructions for Applicants for some useful links. The word limit
is <u>400 words</u> .
2.5j Potential Risks and Ethical Concerns (maximum <u>400 words</u>).
2.5k Dissemination and Knowledge Exchange Plan (maximum 500 words).

2.5l Outline of FAIR data management and stewardship (maximum 500 words).		
2.5m IP Considerations (maximum <u>500 words</u>).		
2.6 References		
2.6 References Provide a list of publications/references (<u>maximum 30</u>) cited in the project description above		
Trovide a list of publications, references (<u>maximum so</u>) effect in the project description above		
Francis -		
Example Smyth, B.P. & O'Brien, M. (2004) Children Attending Addiction Treatment Services in county Dublin,		
1990-1999. European Addiction Research, 10(7455) pp. 68-74.		
2550 25551 2410 pean / 1441000 mesearshy 20(7 155), pp. 657 m		
Section 3: DETAILS OF RESEARCH TEAM		
Decembra Team Delea		
Research Team Roles		
3.1 Principal Investigator's Role		
Outline the role of the PI in the project on a day-to-day basis including amount of time to be spent		
working on the project either as a percentage or proportion of a full time equivalent (FTE)		
(maximum <u>250 words</u>).		
3.2 Co-Applicants Role		
For each Co-Applicant, please identify the type of Co-Applicant they are here (Researcher Co-		
applicant, Knowledge User Co-applicant, or PPI Co-applicant) and outline their role in the project on		
a day-to-day basis including amount of time to be spent working on the project either as a		
percentage or proportion of a full time equivalent (FTE). Describe the specific contribution and		
responsibilities of the Co-Applicant (maximum <u>250 words</u>).		

3.3 Collaborator's Role

Collaboration Agreement Form is availab	Illaboration Agreement Form must be provided. A template ole with all application forms from the HRCI-registered
research charity (maximum <u>250 words p</u>	<u>er Collaborator</u>).
3.4 Personnel	
	nded through this project. Please fill in the following table
·	ired please copy and paste as necessary.
Specify Personnel Type	
State percent time on project	
State specific role in the project	
Person known – y/n	
If yes, name	
If yes, address	
If yes, Present position	
If yes, Academic and Professional	
Qualifications	
	ure of the research personnel relative to the scale and
complexity of the project. The word lim	nit is <u>400 words</u> .
COTION A. DECEMBOIL INSTITUTION	INFRACTRICTURE AND CURRORT
ECTION 4: RESEARCH INSTITUTION	INFRASTRUCTURE AND SUPPORT
.1 Host Institution Infrastructure and S	iunnort
	ecialist expertise and other support available at the Host
•	he research will be conducted. Please include details of
	cs, methods, trial management or regulatory expertise whe
• •	I the activities/expertise of members of the research team.
maximum 400 words).	
.2 Access to Research Infrastructure	
a valuata a a a al af tha a shida a since a	rch design, data management services and/or other forms

support from a Clinical Research Facility/Centre (CRF/CRC), other infrastructure unit (e.g., Centre for Applied Medical Imaging, CAMI, Centre for Support and Training in Analysis and Research (CSTAR))

For each Collaborator, please outline their role in the project on a day-to-day basis including amount

HRCI-HRCI Joint Funding Scheme 2022: Part B1

at research design or implementation stages?

Yes□
No □
If Yes, the following information must be provided (maximum 400 words):
Name and address of the facility/centre/network
Information on the nature and stage/s of the input/advice/collaboration/service; Detionals for the chains of facility/control/naturals.
 Rationale for the choice of facility/centre/network How the proposed involvement enables the planned research to be undertaken to the
required quality or timescale.
If No, applications involving patients which do not detail such input, advice and/or support (and
where this expertise is not clearly evident within the applicant team) should justify why they have chosen not to access such support (maximum 400 words).
Where applicable a signed Infrastructure Agreement Form (Appendix 1 of the Application Form) must be provided. Failure to provide an Infrastructure Agreement Form(s) will result in the application being deemed ineligible. Electronic signatures are acceptable.
Section 5: PROJECT DURATION AND BUDGET
5.1 Project duration and budget total
Please indicate the expected length of the proposed project in months and the total budget
requested. The minimum duration is 12 months and the maximum is 36 months.
The maximum total value of an award is €300,000. There is no set limit per annum: costs should be
allocated in the year expected to occur.
Duration:
Budget Total:

5.2 Project Budget

See the Instructions to Applicants for detailed guidance regarding the project budget.

A **full detailed breakdown** of **costings** and **justification for** <u>all</u> **funding** is required for items listed under each subheading. You are strongly advised to seek guidance from the research office/finance office in the Host Institution before completing this section of the form. HRCI/HRB will not provide additional funding in the case of either under-estimates or over expenditure.

Use **Table 1** to provide a summary of the costs requested and **Table 2** to justify each amount requested.

Table 1: Total direct costs related to the proposal

Please provide details of the **total amount of funding** requested for each year of the research proposal (Direct Costs only). Note that HRCI/HRB awards will be up to a maximum total award value (direct costs) of **€300,000** for projects from 12 months up to 36 months.

Only include direct costs in this application. HRB will apply a rate of 30% TDMC overhead on the HRB portion of research funding at time of contract for successful applications.

Cost Item	Year 1	Year 2	Year 3	Total
1. Personnel Costs				
a) Gross Salary (inclusive of employees' pension contribution)				
b) Employer's PRSI				
c) Employer Pension Contribution				
e) Student Stipend				
f) Student Fees				
2. Running Costs				
3. FAIR Data Management Costs				
4. Equipment				
5. Dissemination Costs				
Total Costs				

Table 2: Justification of costs.

Under each of the headings please **itemise each cost** and provide a brief but explicit **justification of the costs** claimed.

For Personnel Costs, please state the pay scale used and the level and point on the scale. This should be justified accordingly. For appointment of Research Fellows or Senior Research Fellows evidence of position must be provided at point of award.

Line Item	Justification
-----------	---------------

1. Personnel Costs	
a) Gross Salary	
b) PRSI	
c) Pension	
(max <u>200 words</u>)	
1e) Student Stipend	
(max <u>100 words</u>)	
1f) Student Fees	
(max <u>100 words</u>)	
2. Running Costs	
(max <u>400 words</u>)	
3. FAIR Data	
Management Costs	
(max <u>200 words</u>)	
4. Equipment	
(max <u>200 words</u>)	
E Disconsinution Costs	
5. Dissemination Costs	
(max <u>200 words</u>)	

5.3 Other Funding (maximum 300 words).

Give details of any other financial support available for this or other related projects e.g. existing national or international studies. Indicate project title, funding agency or sponsor, the amount of award and a summary of the project.

Failure to disclose accurately or fully will result in your application being deemed ineligible and withdrawn without further review.

Section 6: ETHICAL AND REGULATORY APPROVAL, AND USE OF ANIMALS

Ethical approval is required for all research work funded by the HRB that involves human participants, human material (including tissue) or animals. Applicants are responsible for ensuring that all necessary approvals are in place prior to the start of the research.

Applicants should allow sufficient time to obtain ethical and/or competent authority approval and/or animal licenses as a copy of such approvals must be submitted to the HRB before the initiation of the award. It is suggested that these are sought in parallel to the submission of the application to the HRB.

Please complete the following Approvals Declaration.

HRB GRANT – APPROVALS DECLARATION

Name of Principal Investigator	«Lead A4pplicant»
Grant Reference	«Grant Reference»
Title of Grant	«Grant Title»
Duration of Grant	«Grant Duration months» months
Commencement Date of Research	«Grant Start Date»

(A) Do you require any of the following approvals* for some/all aspects of your research programme?	Insert Yes/No in all cases
Research Ethics Committee (REC) Approval	
HPRA Authorisations for use of animals in research	
Clinical Trial Approval from HPRA	
HR-CDC Consent Declaration	

^{*}Refers to requirements that were declared at the outset of the project and any additional requirements or amendments since then, including renewals required within the timeframe of the project/programme.

IF **Yes** to any of the above, Complete (B) to (D)

(B)	Approval required from: (e.g. month 1)	Approval anticipated by: (date)	From (e.g. Committee name)
REC Approval			
Animal Authorisations			HPRA
Clinical Trial Approval			HPRA
HR-CDC Consent Declaration			HR-CDC

(C) I confirm that I have received the following	Confirm by completing details below
Research Ethics Committee (REC) Approval	Date received; reference number
Animal Authorisations	Dates received; reference numbers
Clinical Trial Approval from HPRA	Date received; reference number
HR-CDC Consent Declaration from HR-CDC	Date received; reference number

(D) I am not in a position to include confirmation of (tick those that apply)						
REC Approval Animal authorisations Clinical Trial Approval HR-CDC declaration						
at this time but I hereby confirm that I will not proceed with any element of the research programme which requires approval before receipt of approval and sending an updated approval declaration to the HRB confirming same.	als					

PI Signature	Dat	e
HI Signature	Dat	е

Section 7 : PRINCIPAL INVESTIGATOR AND CO-APPLICANT CVs AND COLLABORATOR PROFILES

The templates below **must** be used for CVs.

PI and Co-Applicant CVs can be a maximum of 5 pages and should be broken down as follows: Section 1 (max 2 pages) + Section 2 (max 1 page) + Section 3 (max 1 pages)

PRINCIPAL INVESTIGATOR

7.1 Principal Investigator CV

Section 1 – Required Details (max 2 pages)

Name and o	ont	act deta	ils						
Title					In	stitution			
Forename(s)				A	ddress Line :	1		
Surname					A	ddress Line 2	2		
Email Addre	255				Ci	ity/Town			
Position					C	ounty			
Department	t				Pi	hone No.			
Permanent	Pos	ition	YES	S □/NO □					
Contract Po	ositi	on	YES	□/NO □	If yes, state	contract end	date:		
Research In	stitu	ıtion Let	tter	of Support	nust be prov	ided for (1) o	all Principal I	nvestigators	in a
contract po	sitio	n and (2	2) Ca	-Applicants	in a contrac	t position w	ho are seeki	ng their own	salary.
The formal l	ette	r on hed	adea	l notepaper	and signed b	y the Head c	f School/Res	earch Centre,	/Hospital
must include	e the	e followi	ing i	nformation:					
-				-				icant - insert i	-
	_			_				ich extends u	
-			•			•	•	the HRCI/HR	
					•		•	acilities for wl	
he/she is fully responsible for at least the duration of the award, and (iii) has the capability and									
authority to	me	ntor and	d sup	pervise the r	esearch tear	n.			
Education	ı							T -	
From	То		Qu	Qualification Subject Country Institution		Class	Dept.		
Previous po	sitio	ons							
From		То		Position				Organisatio	n

ORCID (if known)					
For more information and to register please see https://orcid.org/					
ORCID iD number:					
Membership of professional body/council					
Details:					

Section 2 - Publications and funding (max 1 page)

Publication	ons (5 mo	st relevant)					
Please fill	in the tab	ole including	the total	' number of	publications and c	ategorise	that number
according	g to the ad	lditional cat	egories b	elow. Pleas	e list the 5 publica	tions that	are most relevant to
this appli	cation.						
Date of P	ublication)	Title		A	luthors	
			the PI on	each public	cation listed.		
	lications #						
	thor publi	cations #					
Journal A							
Reviews #							
Book Cha	pters #						
Books #							
	ce associa	ted publica	tions* #				
Other#							
_		•		-	ed into peer review	ed confer	ence papers and
				<u> </u>	as per discipline		
		_	ost releva	nt to this a	pplication as Princ	cipal Inves	tigator/Co-
	t (up to 5)						
			ould only	include fur	nding obtained <u>as I</u>	<u>Principal o</u>	<u>r Co-Investigator</u>
• •		required).		T .	1		
Start	Duration	Total	Name	Funding	Type	Title	Role of applicant
mm/yyyy	(months)	amount (currency)	of funder	Body ref. no.	(project/fellowship /other)		
		(**************************************	Junus		7		
		1	1	1	<u> </u>		

Section 3 – Supervisory experience (max 1 page)

Supervisory experience

If you are planning to supervise a higher degree/postgraduate student, as part of this application, please include a brief summary of your supervisory experience to date. Please state the number of

tudents supervised, those successfully completed and indicate how many of these are still in rogress. The word limit is 200 words .	1

7.2 Additional evidence for Lead Applicant

Additional evidence of experience and expertise relevant to this application					
Please describe any additional experience or expertise that will provide evidence of the ability of					
the Lead Applicant to successfully lead the proposed project. Please use this opportunity to					
describe any career gaps in your CV. The word limit is 500 words .					

CO-APPLICANTS

7.3 Co-Applicant CVs

Please fill in the following table for each co-applicant. If more tables are required please copy and paste as necessary. (max. 3 pages per Co-Applicant).

Co-Applicant 1

Section 1 – Required Details (max 2 pages)

Name and contact details					
Title		Institution			
Forename(s)		Address Line 1			
Surname		Address Line 2			
Email Address		City/Town			
Position		County			
Department		Phone No.			
Perspective as a Co-Applicant					
If a Co-Applicant contr	ibutes from more than or	ne perspective please select t	he dominant role		
☐ Researcher Co-Applicant					
☐ Knowledge User Co-Applicant					
☐ PPI Contributor Co-Applicant					

<u>In addition please complete one of the following sections depending on the type of Co-Applicant:</u>

IF RESEARCHER CO-APPLICANT; complete the following									
ORCID (if known)									
For more	e informat	tion and to	registe	r please s	see https://orcid.org/				
ORCID iD number:									
Publicati	ons (5 mo	st relevant)						
-			-		er of publications and cat	_			
	-	lditional ca	tegories	below. P	lease list the 5 publicatio	ns that	are most relevant		
	plication.								
Date of Publication Title Authors									
			the PI o	n each pi	ublication listed.				
	olications #								
	ithor publ	ications #							
Journal A									
Reviews									
Book Cha	apters #								
Books #		1 1 1 . 12							
	ice associa	ted publica	ations* #	ļ					
Other #					.6. 1				
_					ssified into peer reviewed	i confer	ence papers and		
eaitea co	njerence p	proceeaings	wnere	approprie	ite as per discipline				
Dotails o	f rosparch	funding m	ost rolo	vant to th	nis application as Princip	al Invo	etigator/Co-		
	t (up to 5)	_	ost reie	vant to ti	iis application as Fillicip	ai ilives	stigator/Co-		
			hould on	nly include	r funding obtained <u>as Pri</u>	ncipal o	r Co-Investigator.		
Start	Duration	Total	Name	Funding	Туре	Title	Role of applicant		
mm/yyyy	(months)	amount	of	Body	(project/fellowship/other)	776.6	noic of applicant		
		(currency)	funder	ref. no.					
Permanent Position YES □/NO □									
Contract Position YES □/NO □ If yes, state contract end date:									
Research Institution Letter of Support must be provided for (1) all Principal Investigators in a									
contract position and (2) Co-Applicants in a contract position who are seeking their own salary.									
The formal letter on headed notepaper and signed by the Head of School/Research									
Centre/Hospital must include the following information:									
_			_		e research institution of		_		
					s an employment contra				
_	-	_			ch institution upon recei pendent office and resea	•			

which he/she is fully responsible for at least the duration of the award, and (iii) has the capability and authority to mentor and supervise the research team.

Supervisory experience

If you are planning to supervise a higher degree/postgraduate student, as part of this application, please include a brief summary of your supervisory experience to date. Please state the number of students supervised, those successfully completed and indicate how many of these are still in progress. The word limit is **200 words**.

IF KNOWLEDGE USE CO-APPLICANT; complete the following

Evidence of expertise and experience in influencing decision making within knowledge user organisation(s)

Knowledge User Co-Applicants should highlight their previous and current roles in influencing decision-making processes within their organization or other relevant organisations. They should also use this space to highlight their specific experiences and expertise for the Knowledge User Co-Applicant role in relation to the proposed research. The word limit is 300 words.

A **knowledge user** is defined as one in a position of authority to influence and/or make data decisions about health policy or the delivery of services and that can act to ensure that the findings of the research will be translated to influence decision making and change within their (or other) organisations.

Additional evidence of experience and expertise relevant to this application

You may wish to include here any additional experience or expertise that will support the application. For example, you may wish to include any relevant research experience/expertise, previous experience of working in collaboration or links with researchers to produce research or evidence for health, evidence of Patient Public Involvement in your knowledge user role, and roles/responsibilities as a constructive and effective change agent. The word limit is **400 words**.

IF PPI CONTRIBUTOR CO-APPLICANT complete the following
PPI Co-Applicant experience and expertise relevant to this application
PPI Co-Applicants should provide some information regarding their experience and expertise relevant to this application. For example, they may wish to include relevant experience as a service user or carer, relevant experience from their personal lives, prior experience in PPI or any other useful background information. The word limit is 400 words.
Additional evidence of experience and expertise relevant to this application
You may wish to include here any additional experience or expertise that will support the application. For example, you may wish to include any relevant research experience/expertise, previous experience of working in collaboration or links with researchers to produce research or evidence for health, evidence of Patient Public Involvement in your knowledge user role, and roles/responsibilities as a constructive and effective change agent. The word limit is 400 words .

COLLABORATORS

7.4 Collaborators Profile

Please fill in the following table for each collaborator associated with the project. If more tables are required please copy and paste as necessary (max. **2 pages per Collaborator**).

Not all sections will be relevant to all Collaborators.

Collaborator 1

Name and contact details						
Title		Institution				

Forenam	me(s) Address Line			ess Line 1	ine 1						
Surname				Address Line 2							
Email Address					City/	City/Town					
Position					Coun	ty					
Departm	ent					Phon	e No.				
Educatio	n					•				•	
From	То	Qu	alific	ation	Subject		Country	Institu	tion	Class	Dept.
							-				
Previous	position	าร									
From	17	Γο	Po	sition					С	Organisa	ation
ORCID											
ORCID iD	numbe	r:									
Member	ship of p	rofessio	nal k	oody/co	uncil						
Details:											
Publicati	ons (5 m	ost rele	vant)							
Please fil	I in the t	able incl	uding	g the to	tal numbe	r of pub	lications and cate	egorise th	at ni	umber	
according	g to the	addition	al ca	tegories	below. Pl	ease list	the 5 publication	ns that ar	е тс	st relev	ant to
this appli	ication.										
Date of F	Publicati	on		Titl	e			Aut	hors		
Please ui	nderline	the nan	ne of	the PI o	n each pu	ıblicatio	n listed.				
Total Pub	olication	s #									
Senior au	ıthor pu	blication	s #								
Journal A	rticles #										
Reviews	#										
Book Cha	pters #										
Books #											
Conferen	ice asso	iated pu	ıblica	ations* #	‡						
Other#		•									
*Confere	nce asso	ciated p	ublic	ations c	an be clas	sified in	to peer reviewed	conferen	ce pi	apers ai	nd
-						-	r discipline	-	•	•	
Details o	f resear	ch fundi	ng m	ost rele	vant to th	is appli	cation as Principa	al/Co- inv	esti _s	gator (u	p to 5)
							g obtained <u>as Prir</u>				_
Start mm/yyyy	Duration (months		nt	Name of	Funding Body	Type	/fellowship/other)	Title			e of olicant
, уууу	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(curre		funder	ref. no.	(project)	jenowanip/ouiei)			upp	cuiit
				-	-						
										1	

_				
Г				
L				

Note: For each collaborator a signed **Collaboration Agreement Form** must be provided. A template Collaboration Agreement Form is available in **Part C1**. Failure to provide Collaboration Agreement Form(s) will result in the application being deemed ineligible.

All applications for funding must provide a signature page which has been signed by the Principal Investigator and the Dean of Research/CEO/equivalent authorised personnel of the Research Institution. *All signatures must be originals. Electronic versions of signatures are not acceptable.*

Checklist for submission

For all applications

Document Number	Title	Included?
B1	Application form	
Upload attachment	Gantt chart	
Upload attachment	Figures	
D1	PI Signature page	
D2	Host Institution Signature page	

Where applicable

TTHE C applicable		
Document Number	Title	Included?
C1	Collaboration Agreement Form	
C2	Infrastructure Agreement Form	
СЗ	Letters of support	
C4	Warrant for international Host Institutions only	