

**THIS FORM IS FOR PREVIEW ONLY
ONLY FORMS SUBMITTED VIA THE SMARTYGRANTS PORTAL
WILL BE ACCEPTED**

0. Eligibility criteria

* indicates a required field

Employment rights

0.1 What are your employment rights? *

- I am an Australian citizen
- I have permanent residency in Australia
- I will have a valid visa for the entirety of the Fellowship at the latest in January 2020
- None of the above

0.2 Have you held, at any stage, a nationally competitive fellowship or project funding (e.g. National Health and Medical Research Council Fellowship (NHMRC) / Project funding)? *

- Yes
- No

1. Applicant's details

* indicates a required field

1.1 Chief Investigator - A

1.1.1 Applicant *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

1.1.2 Applicant Office Address *

Address

Any, but at least one field is required.

1.1.3 Applicant Office Phone Number *

Must be an Australian phone number.

1.1.4 Applicant Mobile Phone Number *

Must be an Australian phone number.

1.1.5 Applicant Primary Email *

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Must be an email address.

1.1.6 Current Appointment/Position *

1.1.7 Start date *

Must be a date.

1.1.8 Primary university affiliation *

Other:

1.1.9 Primary hospital or health network affiliation *

Other:

1.1.10 Institute affiliation *

Other:

2. Qualifications

2.1 Undergraduate Qualifications

2.1.1 Qualification obtained	2.1.2 University / Institution	2.1.3 Year study commenced	2.1.4 Date of award	2.1.5 Please attach certified copy of letter of award with date of award, academic record, subject details and results
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.2 Postgraduate Qualifications

2.2.1 Qualification obtained	2.2.2 University / Institution	2.2.3 Year study commenced	2.2.4 Date of award	2.2.5 Please attach certified copy of letter of award with date of award, academic
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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record, subject
details and
results

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3. Research Experience

* indicates a required field

3.1 Research experience

3.1.1 Institution	3.1.2 Position title	3.1.3 Research activities	3.1.4 Start date	3.1.5 End date	3.1.6 Number of weekly FTE	3.1.7 Number of months	3.1.8 Number of years
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3.2 Career Disruptions

The purpose of this section is to provide us with the full understanding of your career to accurately determine your eligibility as well as evaluate your record of achievement relative to opportunity.

3.2.1 Was your career interrupted? *

- Yes
 No

Please provide details

3.2.2 Start date	3.2.3 Stop date	3.2.4 Number of weekly FTE	3.2.5 Number of months	3.2.6 Number of years	3.2.7 Reason for disruption
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3.2.8 Describe how your career disruptions affected your research and your work opportunities *

Word count:

Must be no more than 300 words.

3.3 Grants currently held by the applicant as Chief Investigator

3.3.1 Project title	3.3.2 Start date	3.3.3 End date	3.3.4 Funding amount	3.3.5 Funding source
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			\$	

3.4 Grants currently held by the applicant as a Co-Chief Investigator

3.4.1 Project title **3.4.2 Start date** **3.4.3 End date** **3.4.4 Funding amount** **3.4.5 Funding source**

			\$	

3.5 Grants requested by the applicant as Chief Investigator for 2019 and beyond

3.5.1 Project title **3.5.2 Expected date of notification** **3.5.3 Funding amount** **3.5.4 Funding source**

		\$	

3.6 Grants previously held by the applicant as Chief Investigator (past 10 years)

3.6.1 Project title **3.6.2 Start date** **3.6.3 End date** **3.6.4 Funding amount** **3.6.5 Funding source**

			\$	

3.9 Applicant's curriculum vitae

3.9.1 Upload CV including publications from the last 10 years and a selection of the 5 best publications with justification *

Attach a file:

4. Track Record

* indicates a required field

4.1 Research outputs

4.1.1 Briefly describe your research work so far and its contribution to the advancement of knowledge in the scientific community *

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Word count:

Must be no more than 150 words.

4.1.2 Describe your main research outputs: the quality and influence of your publications, your experience of attainment of prizes and awards, further funding, speaking at national or international conferences, and any other output you consider relevant *

Word count:

Must be no more than 300 words.

4.1.3 Describe your experience developing collaborations with other teams and how the collaborations contributed to the impact of the research *

Word count:

Must be no more than 300 words.

4.1.4 If relevant, describe your experience in research translation and your contributions and/or engagement activities in clinical or public health policy, practice or health services development. (Examples of contributions include but are not limited to: meeting and engaging with stakeholders, being cited in various types of clinical or policy materials, participating in committees)

Word count:

Must be no more than 300 words.

4.1.5 If relevant, describe your experience in developing Intellectual Property and/or your role in the commercialisation of research

Word count:

Must be no more than 300 words.

4.2 Leadership

4.2.1 Describe your experience mentoring and /or training team members and your contribution to the development of a research team

Word count:

Must be no more than 300 words.

4.3 Please list the last 10 Masters / Honors students that you have supervised

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4.3.1 Name	4.3.2 Project title	4.3.3 Administering Institution	4.3.4 Commencement date	4.3.5 Completion date

4.4 Please list the last 10 PhD students you have supervised

4.4.1 Name	4.4.2 Project title	4.4.3 Administering Institution	4.4.4 Commencement date	4.4.5 Completion date

5. Project details

* indicates a required field

5.1 Project

5.1.1 Project Title *

5.1.2 Impact Statement - Provide a 'lay' description outlining the impact your research will have on the community *

Word count:
no more than 60 words

5.1.3 Scientific background and rationale for the project. Include in-text references using the format of your choice (e.g. citation-sequence, name-year, citation-name or other) *

Word count:
Must be no more than 1000 words.

5.1.4 List of references *

5.1.5 Aims and Objectives. *

- 1)
- 2)

Word count:

Must be no more than 250 words.

A list with bullet points is recommended.

5.1.6 Classify your project (if your project falls into more than one category, classify according to the main objective/endpoint) *

5.2 Fundamental science project

5.2.1 Research design, plan and timeframe. Include, if relevant, details about phases of the research, data collection, sample size, analytical plan, etc. Be as specific as possible and justify the feasibility and timeframe of the project. *

Word count:

Must be no more than 900 words.

5.2.2 Upload any relevant graphs or images that will help clarify your project

Attach a file:

5.2.3 Highlight possible areas of your project that you anticipate to prove challenging and how you intend to manage the possible situations and outcomes from it. *

Word count:

Must be no more than 300 words.

5.3 Clinical research / Public health research

5.3.1 Research design and methodology for data collection. Justify different phases, feasibility and timeframe. *

Word count:
Must be no more than 600 words.

5.3.2 Data analysis plan. Include details about sample size, statistical plan, etc. if relevant *

Word count:
Must be no more than 300 words.

5.3.3 Upload any relevant graphs or images that will help clarify your project

Attach a file:

5.3.4 Highlight possible areas of your project that you anticipate to prove challenging and how you intend to manage the possible situations and outcomes from it. *

Must be no more than 300 words.

5.4 Clinical Trial

5.4.1 Study design (e.g. prospective, comparative, randomized, placebo-controlled phase 2 clinical trial evaluating the efficacy and safety of ...) *

no more than 50 words

5.4.2 Inclusion criteria (write bullet points) *

Word count:
no more than 200 words

5.4.3 Exclusion criteria (write bullet points) *

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Word count:
Must be no more than 200 words.

5.4.4 Research design and methodology for data collection. Be as specific as possible and justify the feasibility and timeframe of the project. *

Word count:
Must be no more than 500 words.

5.4.5 Primary endpoint *

no more than 50 words

5.4.6 Secondary endpoints (write bullet points) *

Word count:
no more than 150 words

5.4.7 Data analysis plan. Be specific and include details about sample size, statistical plan, etc. *

Word count:
Must be no more than 300 words.

5.4.8 Upload any relevant graphs or images that will help clarify your project

Attach a file:

5.4.9 Highlight possible areas of your project that you anticipate to prove challenging and how you intend to manage the possible situations and outcomes from it. *

Word count:

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Must be no more than 300 words.

5.5 Program or Patient initiative

5.5.1 Project design and methods: describe the program / intervention / initiative, the targeted population, how patients will benefit from the program, etc. Justify feasibility and timeframe. *

Word count:
no more than 1000 words

5.5.2 Upload any relevant graphs or images that will help clarify your project

Attach a file:

5.6 Environment

5.6.1 Describe the environment you will be working in, the type of administrative and technical support system you will receive, the collaborative and mentoring opportunities your will benefit from and the potential for team building *

Word count:
Must be no more than 300 words.

5.7 Innovation / Translation and Impact Evaluation

The **Innovation** criterion is defined as: the project is innovative and/or creative and has the potential to advance knowledge and understanding

The **Translation** criterion is defined as: the project has a clear potential to:

- ▶ Translate ideas, insights, and discoveries generated through basic scientific inquiry into the prevention and treatment of human disease *and/or*
- ▶ Improve the health of the population or a specific patient population or community, achieve a desired health outcome or bring changes in clinical practice / policy

5.7.1 Outline what is innovative about the project and/or a tangible translational plan *

Word count:
Must be no more than 300 words.

5.8 Commercialization and IP

5.8.1 Does the project include commercialisation or IP activities? *

- It includes commercialization activities
- It includes IP activities
- It includes neither commercialization nor IP activities

5.8.2 Outline the anticipated commercial process for the product and the steps already taken. Justify feasibility and timeframe. *

Word count:

Must be no more than 300 words.

5.8.3 Outline the anticipated IP process for the product and the steps already taken. Justify feasibility and timeframe. *

Word count:

Must be no more than 300 words.

5.9 Ethics

5.9.1 Do you require ethics approval for this project? *

- Yes
- No

5.9.2 Do you have the required ethics approval(s) already? *

- Yes, all of them
- Some of them
- None

5.9.3 Please upload relevant ethics approval(s)

5.9.4 Is the ethics approval for

	<input type="radio"/> Humans <input type="radio"/> Animals <input type="radio"/> Other biological material
	<input type="radio"/> Humans <input type="radio"/> Animals <input type="radio"/> Other biological material
	<input type="radio"/> Humans

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	<input type="radio"/> Animals
	<input type="radio"/> Other biological material
	<input type="radio"/> Humans
	<input type="radio"/> Animals
	<input type="radio"/> Other biological material

5.9.5 Please provide information on the process for obtaining (remaining) ethics approval(s), the name(s) of the ethics committee(s) and advise of any possible foreseeable delays. If you know when the committee(s) is/are scheduled to make a decision, please indicate the date(s) *

no more than 300 words

The possibility of long delays will not affect your chances of receiving a grant; we require this information for planning purposes.

5.10 Project dates and location

5.10.1 Expected start date *

Must be a date.

5.10.2 Expected completion date *

Must be a date.

5.10.3 Main site at which the project will be physically undertaken *

Other:

5.10.4 If the project is connected to an Institute (not a hospital or a university), please indicate here *

Other:

5.11 Keywords

Write at least one keyword for your project (e.g. therapeutic area, disease, type of intervention, etc.)

5.11.1 Keyword 1 *

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5.11.2 Keyword 2

5.11.3 Keyword 3

6. Milestones and Expected Research Outputs

* indicates a required field

6.1 Milestones

Milestones are **measurable outcomes and/or landmarks during your research project**.

When constructing the research plan, you should anticipate what these intermediary steps are and how long it will take to reach them

Describe your milestones and the anticipated dates when you think these milestones will be reached.

As a condition of your agreement with THRF, you will be asked to provide follow-up reports about the milestones at the anticipated dates written here.

Vague or unprecise milestones will affect your scoring.

6.1.1 Milestone

6.1.2 Anticipated date

6.1.3 Indicate how the milestone aligns with the research plan; include associated costs and any expected travel component

6.1.1 Milestone	6.1.2 Anticipated date	6.1.3 Indicate how the milestone aligns with the research plan; include associated costs and any expected travel component

6.2 Expected outputs and success

6.2.1 List the expected outputs of the project and define the impact that the project will have if successful (categories of impact can be: advancement of knowledge, community benefit, clinical implementation, economic benefit, policy change) *

Word count:

Must be no more than 150 words.

7. Budget

* indicates a required field

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7.1 Budget

Detail the anticipated spending here, on a year by year basis.

7.1.1 Year **7.1.2 Item** **7.1.3 Details** **7.1.4 Units** **7.1.5 Cost** **7.1.6 Total cost**

7.1.1 Year	7.1.2 Item	7.1.3 Details	7.1.4 Units	7.1.5 Cost	7.1.6 Total cost
	Other:			\$	\$
	Other:				
	Other:				

7.1.7 Total Expenditure Amount

\$

This number/amount is calculated.

7.1.8 Total amount requested from The Hospital Research Foundation *

\$

Must be a dollar amount.

Time commitment

Weekly Full-Time Equivalent (FTE) you will work for the project *

Must be a number and between 0 and 1.

Additional notes

8. Supervisor / Head of Department Statement

* indicates a required field

8.1.1 Supervisor/Head of Department *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

8.1.2 Position *

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8.1.3 Office Address

Address

8.1.4 Office Phone Number *

Must be an Australian phone number.

8.1.5 Mobile Phone Number

Must be an Australian phone number.

8.1.6 Primary Email *

Must be an email address.

8.1.7 Primary university affiliation *

Other:

8.1.8 Primary hospital or health network affiliation *

Other:

8.1.9 Institute affiliation *

Other:

8.1.10 Please upload the statement using the template provided here (<https://www.hospitalresearch.com.au/wp-content/uploads/2019/02/Supervisor-Statement-Template.docx>) *

Attach a file:

14. Administering Institution

* indicates a required field

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14.1 Administering Institution *

Other:

14.2 Administering Institution ABN *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

15. Declaration

* indicates a required field

- I certify that to the best of my knowledge the statements made in this application are true.
- I understand that if The Hospital Research Foundation approves a grant, I will be bound by the contents of my application to carry out my project as I have described and my application will form part of my contractual agreement with The Hospital Research Foundation.

Chief Investigator's Full Name *

Date *

Must be a date.

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