**Faculty of Medicine, Nursing and Health Sciences**

**Monash–Yale Strategic Grant Program in Metabolism**

**For Funding Commencing in 2017**

**INSTRUCTIONS TO APPLICANTS**

**AND**

**APPLICATION FORM**

**Submission Closing Date: 21 November 2016**

**2017 Application Form**

**Application submission:**

Please submit an electronic version of completed application (with signatures) to Monash University at the following email address:   
[bdi-metabolism@monash.edu](mailto:bdi-metabolism@monash.edu)

**Attachments:**

**- Current 2-page CV for each Chief Investigator;**

**- Letter(s) of Support (1-page each) from the Chief Investigator of the host organisation.**

APPLICANT DETAILS:

|  |  |  |
| --- | --- | --- |
| Full Name | Surname |  |
| Given Names |  |
| Contact details | Email address |  |
| Mobile/Cell Phone |  |
| Nationality | (as per passport) |  |

APPLICATION TYPE

Research Grant (up to $50K)  Travel Grant (up to $5K)

# 1. PROJECT SUMMARY

1a. PROJECT TITLE:Provide a concise and informative title in lay terms

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| --- |
|  |

**1b.** SUMMARY OF PROJECT: Write a succinct summary of the objectives and significance of the project. Briefly explain how this project is novel and/or is a proof-of-concept for a larger project that will lead to external funding applications for nationally and internationally competitive schemes and/or new industry, government or community support. Please name the competitive grant schemes, industry funding or organisations to which future applications based on this project will be submitted. (Maximum 500 words)

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1c. INVESTIGATOR (CI) SUMMARY:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Home University** | **Full Name** | **Position at Home University** | **Department/School/ Institution** |
| CI 1 | Monash |  |  |  |
| CI 2 | Yale |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

\* Add additional rows for additional CIs

***Note: Each application must include at least one Chief Investigator from Monash University’s Biomedicine Discovery Institute and at least one Chief Investigator from Yale University’s School of Medicine. (A maximum of 8 Chief Investigators per application will be permitted.)***

1d. PROGRAM RELEVANCE

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| Briefly explain how this project aligns with the strategic research focus of the metabolism programs at both universities. (Maximum 300 words) |
|  |

1e. COLLABORATIVE BENEFIT

|  |
| --- |
| Briefly explain the anticipated involvement of research teams at both universities and the benefits for members of each team. (Maximum 300 words) |
|  |

# 2. RESEARCH PROJECT

***Applications that do not adhere strictly to the instructions will be rejected without further consideration. Applicants will NOT be given an opportunity to modify and resubmit their proposal.***

**In no more than 3 pages** (font size 11pt) under the following headings, describe your project:

* **Supporting research/background to the project**
* **Aims of Project**
* **Methodology, research plan and timetable**
* **Role of personnel on the project**
* **Outline any previous collaborative successes**

**Supporting research/background of the project**

**Aims of project**

**Methodology, research plan and timetable**

**Role of personnel on the project**

**Outline any previous collaborative successes between these researchers for this project** (Maximum 300 words)

**3. BUDGET**

The budget must be clearly itemised in **AUD$**.

(An indicative conversion rate of USD$1=AUD$1.33 may be used)

|  |  |
| --- | --- |
| **3a. Detailed Budget Items** | ***AUD $*** |
| **Travel** (List items here – Max $5k per trip, max $10K per project. Provide sufficient detail of who will travel, the destination and expected length of stay.) |  |
| Subtotal |  |
| **Personnel** (List items here – Salary plus on-cost, if a research assistant is required specify the level of employment and number of hours/weeks) |  |
| Subtotal |  |
| **Equipment**  (List items – include equipment to be purchased, hired, usage fees, and maintenance costs) |  |
| Subtotal |  |
| **Laboratory & Operations**  (List items – include supplies, consumables, animal costs, waste disposal, etc.) |  |
| Subtotal |  |
| Other Costs(List items) |  |
| Subtotal |  |
| **TOTAL** funds requested in this application (<=$**50K**): |  |

**3b Budget Justification**

**Travel**

**Personnel**

**Equipment**

**Laboratory & Operations**

**Other costs**

# 3c. Other Sources of Funding

|  |
| --- |
| Indicate if there are any funds committed to this project from other sources. If so, please specify the other source(s) of funding for this project and the amount committed. (Maximum 150 words) |
|  |

# 3d. Split of Funds Indicate how the requested project funds (excluding travel) will be split between the universities.

|  |  |  |
| --- | --- | --- |
| Faculty | Percentage of Split | Amount ($) |
| Monash University |  |  |
| Yale University |  |  |
| Total |  |  |

# 4. CHIEF INVESTIGATORS

For **EACH** named Chief Investigator please complete the following section. Duplicate as necessary.

(A maximum of 8 Chief Investigators per application is permitted.)

**4.1.1 CHIEF INVESTIGATOR (MONASH) DETAILS**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Title** |  | **First name** |  | | **Surname** |  |
| **Faculty & Department/School** | | | |  | | |
| **Type of Employment appointment** (Contract or tenured) | | | | If on contract, end date of contract? | | |
| **Fraction:** (1.0 full time) | | | |  | | |
| **Is your employment funded from a Competitive Research Grant or industry-funded project?**  🞏 Yes 🞏 No | | | | | **If yes, are you a named CI on this project?**  🞏 Yes 🞏 No | |

**4.1.2 PUBLICATIONS**

Extract a list of all publications for the last 5 years (2012-2016). Research output accepted for publication may be included, provided this is clearly notated in the list. Mark any publications relevant to the proposed project with an asterisk.

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**4.1.3 OTHER INFORMATION**

Include any other track record information from 2012-2016 covering issues such as prizes, patents and awards, relevant experience in industry, activities and achievements in your discipline, disruptions to your career and circumstances which may have slowed research and publications activities. (Maximum 500 words)

|  |
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**4.2.1 CHIEF INVESTIGATOR (YALE) DETAILS**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Title** |  | **First name** |  | | **Surname** |  |
| **Faculty & Department/School** | | | |  | | |
| **Type of Employment appointment** (Contract or tenured) | | | | If on contract, end date of contract? | | |
| **Fraction:** (1.0 full time) | | | |  | | |
| **Is your employment funded from a Competitive Research Grant or industry-funded project?**  🞏 Yes 🞏 No | | | | | **If yes, are you a named CI on this project?**  🞏 Yes 🞏 No | |

**4.2.2 PUBLICATIONS**

Extract a list of all publications for the last 5 years (2012-2016). Research output accepted for publication may be included, provided this is clearly notated in the list. Mark any publications relevant to the proposed project with an asterisk.

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**4.3.2 OTHER INFORMATION**

Include any other track record information from 2012-2016 covering issues such as prizes, patents and awards, relevant experience in industry, activities and achievements in your discipline, disruptions to your career and circumstances which may have slowed research and publications activities. (Maximum 500 words)

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**5. ETHICS APPROVAL**

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| --- | --- | --- |
| Does the project involve: |  | If Yes, has relevant university approval been received? |
| Animal experimentation | 🞏 YES 🞏 **NO** | 🞏 **Pending** 🞏 **Approved**  **Committee Name:** If approved, Expiry Date: |
| Genetic manipulation/ recombinant DNA technology? | 🞏 YES🞏 NO | 🞏 **Pending**  🞏 **Approved**  **Committee Name:** If approved, Expiry Date: |
| Access to social science data sets? | 🞏 YES🞏 NO | 🞏 **Pending**  🞏 **Approved**  **Committee Name:** If approved, Expiry Date: |
| Human subjects | 🞏 YES🞏 NO | 🞏 **Pending**  🞏 **Approved**  **Committee Name:** If approved, Expiry Date: |
| NOTE: If Ethics approval is required to undertake the proposed research, it must be obtained from the relevant Research Ethics Committee in all cases. Funding will not be released until ethics approval is obtained. Time extensions resulting from delays in obtaining ethics approval will be considered on a case-by-case basis. | | |

**6. CERTIFICATIONS**

**6.1 Certification by Primary Chief Investigator (First Named) from Each University (CI)**

I certify that the investigators are eligible (as defined in Section 2 of the Guidelines) to apply for the Monash-Yale Strategic Grants in Metabolism Funding Scheme, and that all details on this form are correct.

I understand and agree that all research must be carried out in accordance with [*Monash University’s Research Policy*](http://www.policy.monash.edu/policy-bank/academic/research/responsible-conduct-of-research-policy.html) and Monash University’s ethics clearance policies.

|  |  |
| --- | --- |
| **Name of Chief Investigator 1 (Monash) CI-1:** | |
| **Signature:** | **Date:** |

|  |  |
| --- | --- |
| **Name of Chief Investigator 2 (Yale) CI-2:** | |
| **Signature:** | **Date:** |

**6.2 Certification by CI’s Director of Institute / Head of School**

I have read and support this application and certify that the Institute/School can and will meet each applicant’s basic infrastructural needs. I am prepared to have the project carried out under the circumstances set out by the applicant. I have noted the amount of time which the investigator/s will be devoting to the project and agree it is appropriate given his/her/their teaching, administrative and other research commitments. The work involved in this project falls within current Biomedicine Discovery Institute/Yale School of Medicine priorities.

|  |  |
| --- | --- |
| **Director of Biomedicine Discovery Institute of CI-1 (Monash):** | |
| **Signature:** | **Date:** |

|  |  |
| --- | --- |
| **Head of School of Medicine of CI-2 (Yale):** | |
| **Signature:** | **Date:** |