RACP Research Development Grant application

RACP Research Development Grant application

Prior to completing the application form, applicants must:

1. Read the Award Terms and Conditions. You may contact the Senior Administration Officer for clarifications prior to submitting an application.
2. Assess your eligibility carefully. Take special note where awards are tenable and the qualifications/research experience required for each award.

You may submit a project proposal for consideration for multiple individual awards within this award category. However, multiple applications put forth for one award by the same applicant will not be considered.

Eligible applicants need to submit only one application when applying for one or multiple awards under this category. Specify the awards you wish to apply for in Section D of this form.

Applicants must submit an application using the online application form. Hard copies and emailed applications (e.g. in Word or Pdf) will not be accepted.

If you are conducting the proposed project under the guidance of a supervisor, you will be asked for your supervisor's contact details to provide their input to your application.

You will be required to provide an ORCID (Open Researcher and Contributor ID) in this application. If you don't have one yet, you can sign up for one here.

The Senior Administration Officer may be reached at 02 9256 9639 or foundation@racp.edu.au

Application Details

* indicates a required field

Section A - Personal Details

Full name *

Title	First Name	Last Name

MIN *

Must be a number.

Primary Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Primary Phone Number *

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Primary Email *

Must be an email address.

Membership status *

Division / Faculty / Chapter *

Specialty *

ORCID (Open Researcher and Contributor ID) *

If you don't have one yet, you can sign up for one [here](#).

Section B - Project and Institution details

Project Title *

Lay summary *

Word count:
Must be no more than 250 words.
Provide a short description of your project. The Lay summary you provide will be used by the RACP Foundation on its recipient webpage and related publications, and shared with the donor, partner organisation, or committee supporting your award.

Research category (select all that apply) *

☐ Basic
☐ Clinical
☐ Epidemiological
☐ Indigenous
☐ Not applicable
☐ Other:

Project start date *

Must be a date.

Estimated project end date *

Must be a date.

Proposed commencement date of RACP funding *

Must be a date.

Total Amount *

$

What is the total amount requested in a single year of funding

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Administering Institution *

Organisation Name

Administering Institution Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Is the administering institution the same as the institution where this research is undertaken? *

○ Yes
○ No

Institution where research is undertaken

Organisation Name

Research Institution Address

Address

Awards and Eligibility

* indicates a required field

Section C - Eligibility

Are you currently enrolled in or about to enrol in a higher research degree or equivalent (PhD, Masters by research, etc.)? *
○ Yes   ○ No

Is your research project *
○ Short term
○ Long term
○ Postgraduate study

Month/year of commencement of PhD/Masters/research higher degree or equivalent of higher degree *

Category of higher research degree or equivalent PhD/ Masters by research / Other equivalent higher Research degree *
○ PhD

○ Masters by Research
○ Other equivalent Research Higher Degree

Consideration Statement - Please list any factors that may have significantly interrupted your career

Word count:
Must be no more than 100 words.

Are you currently receiving or have you recently received funding from the RACP? *

○ Yes   ○ No

Consider awards you have received from the RACP Foundation in the past 3 years.

Upload your progress/final report for your most recent RACP award

Attach a file:

Use the template available [here](#). For 2020 and 2021 award recipients, contact Foundation@racp.edu.au to request for access to the online report form.

Advise the amount of time that you are currently employed/ undertaking research at your administering institution

Provide FTE in the following areas:

In research *

0.6FTE minimum

In clinical work

In teaching / administrative work

Explain how your time allocated to research is equivalent to 0.6FTE or greater *

Section D - Awards applied for

Select the awards you wish to consider for in the list below. Explain why you consider yourself and your project eligible for each award selected.

See list and eligibility details of available awards here.

Awards you are applying for	Why do you consider yourself and your project eligible for this award?

When considering your responses to the questions above, please refer to the following definitions:

- Grant - grant funding for the costs of undertaking research
- Fellowship - funding primarily providing stipend/salary for the applicant
- Award - recognition of an achievement with no associated remuneration
- Prize - recognition of an achievement with associated remuneration
- Conference support - funds provided for conference participation, registration or travel/accommodation
- Other - involvement not otherwise included in the above classifications

List all other past/completed funding which is external to the RACP and relevant to this application (if applicable):

Classification	Funding organisation and name of grant	Duration (start/end dates)	Funding amount - Total	Scientific title of project / grant application	Brief description of applicant's role in project	Funds awarded to Applicant - Total
			$			
			$			
			$			
		Please include month and year	Provide total funding amount, not amount per annum		e.g. CIA, PI, CI-other, associate investigator, other investigator, etc.	The funds that you have at your disposal, particularly for multi-investigator grants

List all other current funding (at the date of application) that is external to the RACP and relevant to this application (if applicable).

Classification	Funding organisation	Duration (start/end dates)	Funding amount - Total	Scientific title of project /	Funds awarded to	Relevant to this application	Brief description of

				grant application	Applicant Total		applicant's role in project
			$		$		
			$		$		
			$		$		
		Please include month and year	Provide total funding amount, not amount per annum		The funds that you have at your disposal, particularly for multi-investigator grants		e.g. CIA, PI, CI-other, associate investigator, other investigator, etc.

List all other potential funding that is external to the RACP and relevant to this application (if applicable).

Applications in progress or intended in the remainder of the current calendar year

Classification	Funding organisation and name of grant	Duration (start/end dates)	Funding amount - Total	Scientific title of project / grant application	Funds awarded to Applicant	Relevant to this application	Brief description of applicant's role in project
			$		$		
			$		$		
			$		$		
		Please include month and year	Provide total funding amount, not amount per annum		The funds that you have at your disposal, particularly for multi-investigator grants		e.g. CIA, PI, CI-other, associate investigator, other investigator, etc.

Applicant Qualifications

* indicates a required field

Section E - Academic Qualifications

Starting with the most recent, list all university qualifications and post higher degrees, including the year of award and institution.

Institution	Degree	Year of award

Section F - Career and Employment History

Starting with the most recent, list your post graduate appointments, including the institution or company, the position held and the date, since graduation.

Institution	Position held	Period
		Provide start and end dates

Section G - Research Involvement

Research involvement evidenced by grants and awards listed in section F (10 points)

Give details of your current research activities and details of any previous research experience. If possible give example(s) of how you have sought involvement in research and your role *

Word count:
Must be no more than 500 words.

Describe noteworthy scientific achievements to date (10 points)

Please do not just list information provided elsewhere in the application. Focus on scientific achievements, not qualifications, awards and progression through career landmarks. Use this section to indicate why highlighted achievements are noteworthy in your career context particularly.

For example: Was a research question your own idea? How was a research outcome dependent on your effort particularly? Has a scientific achievement impacted clinical practice? How is an achievement notable given your research opportunity?

*

Word count:
Must be no more than 100 words.

Starting with your most recent, list the top five peer-reviewed full-length publications in ranking order, and briefly state your role as an author on the publication. Explain your contribution to the work reported in these publications. *

Include publications that highlight your research excellence and/or indicate your capacity for the research proposal.

The following three sections have a total value of 25 points.

Full bibliographic reference	Publication links	Your role in this publication and reason for selection
Title, all authors, journal reference	PMID, DOI or equivalent	Must be no more than 50 words.

List up to 30 peer-reviewed full-length publications in referred journals. Do not include published abstracts or correspondence .*

Full bibliographic reference	Publication links	Your role in this publication and reason for selection
Title, all authors, journal reference	PMID, DOI or equivalent	Must be no more than 50 words.

Proposed Program

* indicates a required field
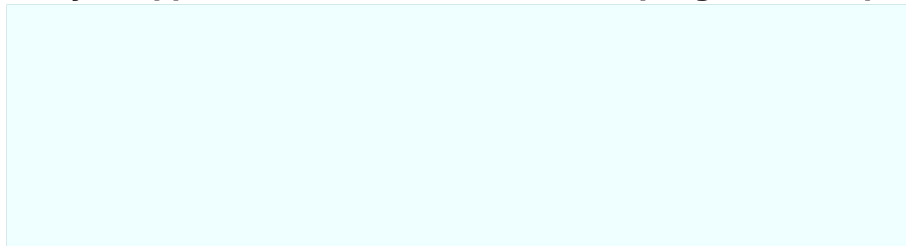
Section H - Proposed Program

Provide a summary of your research proposal and include the rationale for the research along with a statement of purpose or research aims for scientific enquiry, hypothesis, new knowledge, technical advancement and/or innovation *
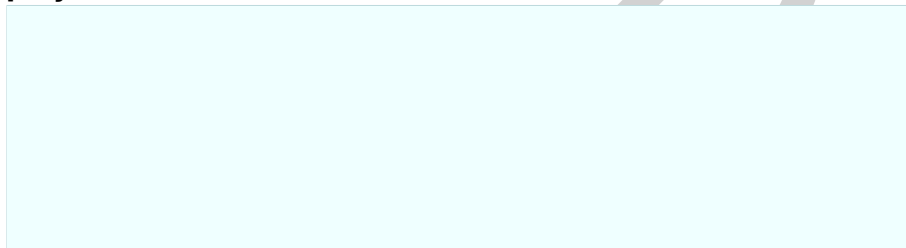
Word count:

Must be no more than 750 words.

Research design and methods: Provide sufficient details for technical assessment of scientific protocol, feasibility and validity of data. This should include where appropriate: expected numbers, statistical power, and analysis plan and projected timelines. A qualitative study should include an explanation of the analytic approach to be used and the sampling methods proposed *
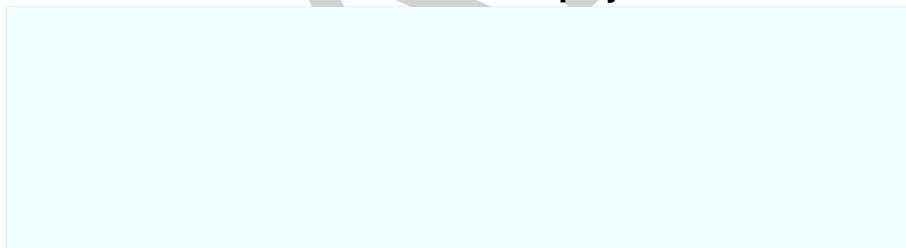
Word count:
Must be no more than 750 words.

Research impact: include the anticipated outcomes/benefits of the research, and comment on the extent of knowledge transfer that would occur as a result of the project *

Word count:
Must be no more than 500 words.
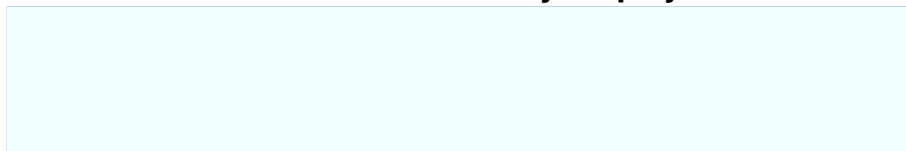
Research references relevant to the project *

Word count:
Must be no more than 500 words.
Maximum 20 references.

Provide an indicative timetable for your project. *

Word count:
Must be no more than 150 words.

Are you conducting this project under the guidance of a supervisor? *
○ Yes   ○ No
If yes, you will be required to provide your supervisor's name and email address at the end of this application form.

Provide a budget for the project indicating: i) how the RACP funding will be used; and ii) how any secured funding will be used. Please include the amount and the funding source

Funding organisation and name of award	Duration (start/end dates)	Funding amount	Use of funding
		$	
		$	
		$	
		$	
		$	
		Must be a dollar amount.	

If your application needs to refer to any relevant graphs or figures, upload them in a single pdf file
Attach a file:

This is optional. Ensure that you have labeled the figures you have provided and specify which section or question of your application this relates to.

Will ethics approval be required? *
○ Yes   ○ No

Has ethics approval already been attained? *
○ Yes   ○ No

Upload a copy of the ethics approval if available
Attach a file:

Certification

* indicates a required field

I certify that the information supplied in this application is true and correct. I understand that the Royal Australasian College of Physicians may wish to verify this information with any institution or individual. I consent to such inquiries being made as part of the selection process *

○ Yes   ○ No

I have read the award terms and conditions and, if selected for an award, agree to abide by them. *
○ Yes   ○ No
Read the award terms and conditions.

Signed *   Title   First Name   Last Name

Certification Date *

Provide the date today when you complete this application

Supervisor Statement

Please provide your supervisor's name and email address below.

Supervisor name *   Title   First Name   Last Name

**Supervisor email
address ***

Must be an email address.

Once you have completed and submitted your application, this will be reassigned to your supervisor and an email will be sent to them to complete a supervisor statement form. They will be able to see the contents of your application but not change or amend your submission. You will be unable to access your application at this time.

Remember that your supervisor's submission is required before your application is considered complete. Please coordinate directly with them to ensure that they are able to complete this before the closing date.