



2019 Research Grants Application Form

Applicant Name	
Project Title	

Grant applying for:

- CSANZ-Boehringer Ingelheim Cardiovascular Research Innovation Grant
- CSANZ-Boehringer Ingelheim and Eli Lilly Cardio-metabolic Research Innovation Grant
- CSANZ-Bayer Young Investigator Research Grant

1. APPLICANT DETAILS

Title		Name	
Current Position			Commencement Date
Institution			
Postal Address			
Telephone		Mobile	
Email			

Most Recent and Highest Academic Qualifications		
Year	Degree	Conferring Institution

2. RESEARCH PROJECT DETAILS

Project Title	
Field of Cardiology	
Institution <i>if different from above</i>	

A project proposal of no more than 1,500 words must accompany your application and comprise the following:

- i. Short background
- ii. Study design
- iii. Methods
- iv. Milestones/timeline
- v. Budget

3. SUPERVISOR (current or proposed)

Surname			
First Name		Title	
Qualifications			
Institution		Department	
Telephone		Mobile (optional)	
Email			

4. FUNDING SOURCES

Is this application under review by any other funding body? If YES, please provide details.

Funding Body	Details of Application (include award category & reference number if known)

5. CLEARANCE REQUIREMENTS

Research funded by the CSANZ shall be conducted in accordance with the *NHMRC Australian Code for the Responsible Conduct of Research (2018)* / *New Zealand National Ethics Advisory Committee guidelines for intervention and observation studies*. Clearances for research that involve any of the following shall be obtained from the appropriate Ethics Committee and/or Biosafety Committee and submitted to the CSANZ.

		YES / NO
5.1	Does this project involve experiments on human subjects?	
	If YES, is Human Ethics Review Committee approval attached ?	
5.2	Does this project involve experiments on animals?	
	If YES, is Animal Ethics Review Committee approval attached ?	
5.3	Does this project involve genetic manipulation of organisms or the use of radioactive/carcinogenic / toxic chemicals?	
	If YES, is Institutional Bio-safety Committee approval attached ?	

6. DECLARATION

(a) Applicant

I certify that all details given in the application are correct and I agree to carry out the project in accordance with the applicable CSANZ Research Grant Conditions and in accordance with the principles of the *NHMRC Australian Code for the Responsible Conduct of Research (2018)* / *New Zealand National Ethics Advisory Committee guidelines for intervention and observation studies*.

By signing, I confirm that I have complied with all instructions in the application form and understand that failure to do so may result in the withdrawal of the application from the review process.

Full Name			
Signature		Date	__/__/19

(b) Supervisor

I certify that all details given in the application are correct and I agree to carry out the project in accordance with the applicable CSANZ Research Grant Conditions and in accordance with the principles of the *NHMRC Australian Code for the Responsible Conduct of Research (2018)* / *New Zealand National Ethics Advisory Committee guidelines for intervention and observation studies*.

Full Name			
Signature		Date	__/__/19

(c) Head of Department

I certify that appropriate facilities will be available to the applicant if successful and I will ensure that the project will be carried out in accordance with the applicable CSANZ Research Grant Conditions.

Title		Full Name	
Position			
Department		Institution	
Signature			Date ___/___/19

CHECKLIST

Before submitting, check that your application includes:

- completed application form
- 2 page CV
- list of publications in last six years
- letter of support from supervisor
- 1,500 word (maximum) Research Project Outline
- clearance documents declared at item 6

Applications can be scanned and emailed to: info@csanz.edu.au

Or by post to:

CSANZ
Suite 4, Level 12
189 Kent Street
SYDNEY NSW 2000
AUSTRALIA

Closing date for applications

Friday, 3 May, 2019