

CANCER RESEARCH GRANT APPLICATION 2018

Disbursements of funds made available by the ALIVE Charity Foundation

1. Details	Principal applicant	Co-applicant 1	Co-applicant 2
Surname			
Forename(s)			
Title (Prof, Dr, Mr, Ms etc.)			
Employment No: (Employee Code – Note down from payslip)			
ID Card no:			
Post (Professor, Associate Professor, Senior Lecturer, Lecturer, Assistant Lecturer etc.)			
Full-time resident academic	YES <input type="checkbox"/> / NO <input type="checkbox"/>	YES <input type="checkbox"/> / NO <input type="checkbox"/>	YES <input type="checkbox"/> / NO <input type="checkbox"/>
Part-time resident academic (applicable from TR4 onwards) (Note down TR appointment)	YES <input type="checkbox"/> / NO <input type="checkbox"/> TR _____	YES <input type="checkbox"/> / NO <input type="checkbox"/> TR _____	YES <input type="checkbox"/> / NO <input type="checkbox"/> TR _____
Institute/Faculty of			
Department of			
Office telephone no:			
Home telephone no:			
Mobile no:			
UOM E-mail address			
Hours per week on project			
2. Project title (not exceeding 120 characters)			
3. Abstract of proposed study (not exceeding 750 characters)			
4. Tick if the application involves any of the following: <input type="checkbox"/> collaboration with other University Departments/Institutes <input type="checkbox"/> collaborations with other organisations/industry(foreign/local)			
5. Duration of the Research grant		6. Proposed Start Date	
9. Name(s) of collaborating organisation(s)/industrial/partner(s) if applicable			
10. TOTAL Costs (listed on page 5)		€	

11. Breakdown of costs	€
TOTAL COSTS	€

12. DESCRIPTION OF THE WORK

(i) **Project title** (same as section 2 of the application form)

(ii) **Objectives of proposed work** (attach and indicate any additional sheets related to this section if necessary)

(iii) **Justification of resources requested (listed on page 5)** (attach and indicate any additional sheets related to this section if necessary)

(iv) **Programme of work** (attach and indicate any additional sheets related to this section if necessary)

13. COLLABORATIONS

Project title (same as section 2 of the application form)		
Details of organisation	Details of contributions	€
Name and address of organisation Telephone Fax E-mail Name of collaborating researcher Type of organisation / industrial partner	Cash	
	Other resources (?)	
	Total value of contribution	
Endorsement by collaborator/industrial partner		
Signature _____		
Name (block capitals) _____ Position _____		

14. OTHER FINANCIAL SUPPORT (continue on a separate sheet if necessary)

Awarding body	Brief title of research	Funding level €	Period of grant
(i) Grants held (pl. quote Sub-Project/s if granted by this Committee)			
(ii) Applications			
I confirm that the above information is complete and correct Signed _____ Date _____			
at the time of submitting this application. Name _____			

15. WORK REQUIRING REGULATORY OR ETHICAL APPROVAL

e.g. work involving human subjects, animal procedures, non-native agricultural pests or diseases, dangerous pathogens requiring containment level 3 or 4, genetically modified organisms

(i) Does the project involve work that requires a licence or prior approval from enforcement agencies, Bioethics Council, etc? YES / NO

(ii) If the above is YES, has the appropriate licence or approval been obtained? YES / NO

If NO to (ii) above, then confirmation will be required before funds can be released

16. SIGNATURES

Principal applicant Signed _____

Name (block capitals) _____ Date _____

Head of department Signed _____

Name (block capitals) _____ Date _____

Faculty Dean Signed _____

Name (block capitals) _____ Date _____

ANNEX 1(i)

CURRICULUM VITAE OF PRINCIPAL APPLICANT

Surname

First application

YES / NO

Forename(s)

D.O.B

ID Card No:

Gender M/F

Degrees etc. (including dates awarded) (attach and indicate any additional sheets related to this section if necessary)

Posts held (attach and indicate any additional sheets related to this section if necessary)

Publications/patents which have arisen (attach and indicate any additional sheets related to this section if necessary)
(omit section if same as page 10)

Other information (if any) (attach and indicate any additional sheets related to this section if necessary)

ANNEX 1 (ii)

PREVIOUS FUNDING

Have you received previous funding from the RIDT? YES / NO

(If yes, please give details below of any publications/patents which have arisen)

LIST OF RECENT PUBLICATIONS; ALSO PAPERS IN PRESS

Name and Surname (applicant)

Department and Faculty

Project title/s

(attach and indicate any additional sheets related to this section if necessary)

ANNEX 2

PREVIOUS REPORT

Have you received previous funding from the RIDT?

YES / NO

(If yes, please submit below one page report)

ONE PAGE REPORT

Name and Surname (applicant)

Department and Faculty

Project title

(attach and indicate any additional sheets related to this section if necessary)

ANNEX 3 (i)

CURRICULUM VITAE OF CO-APPLICANT 1

Surname	First application	YES <input type="checkbox"/> / NO <input type="checkbox"/>
Forename(s)	D.O.B	
ID Card No:	Gender M/F	

Degrees etc. (including dates awarded) (attach and indicate any additional sheets related to this section if necessary)

Posts held (attach and indicate any additional sheets related to this section if necessary)

Publications/patents which have arisen (attach and indicate any additional sheets related to this section if necessary)

Other information (if any) (attach and indicate any additional sheets related to this section if necessary)

ANNEX 3 (ii)

CURRICULUM VITAE OF CO-APPLICANT 2

Surname First application YES / NO

Forename(s) D.O.B

ID Card No: Gender M/F

Degrees etc. (including dates awarded) (attach and indicate any additional sheets related to this section if necessary)

Posts held (attach and indicate any additional sheets related to this section if necessary)

Publications/patents which have arisen (attach and indicate any additional sheets related to this section if necessary)

Other information (if any) (attach and indicate any additional sheets related to this section if necessary)