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# GRACI 2024 Research Grant Application Form

##### SECTION A - Contact Details and Summaries

##### Contact Details of Principal Applicant

|  |  |  |
| --- | --- | --- |
| Last Name | **First Name** | **Title** |
| **Position** |  | |
| **Department** |  | |
| **Organisation** |  | |
| **City** |  | |
| **Telephone** |  | |
| **Email** |  | |

##### Research Project Title

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| --- | --- |
| Total Funding Requested (GST exclusive): *(NB. GRACI is a Charitable trust and does not pay GST.)* | $ |

***Other support***

|  |  |
| --- | --- |
| Please give details of any other financial support sought (or received) for this project, and expected date of decision (or amount received) |  |

## Please COMPLETE ALL information in this application form.

*For further information please refer to:*

*2024 GRACI Research Grant Guidelines for applicants.*

##### Contact Details of Research Collaborators (if applicable)

##### 

|  |  |  |
| --- | --- | --- |
| Last Name | **First Name** | **Title** |
| **Position** |  | |
| **Department** |  | |
| **Organisation** |  | |
| **City** |  | |
| **Telephone** |  | |
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| --- | --- | --- |
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| **Organisation** |  | |
| **City** |  | |
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| --- | --- | --- |
| Last Name | **First Name** | **Title** |
| **Position** |  | |
| **Department** |  | |
| **Organisation** |  | |
| **City** |  | |
| **Telephone** |  | |
| **Email** |  | |

Copy and paste table if further research collaborators

## Abstract of Research Project (500 words maximum) – Explain the research project, and its significance to gynaecological cancer in New Zealand.

Title:

Abstract:

##### Media Summary of Research Project (200 words maximum)

##### Explain the research project, and its significance to gynaecological cancer in New Zealand, in language understandable to the public as a press release.

## Section B – An outline of the Proposed Research Project

(2 page maximum, excluding references, Font 12 - Times New Roman)

##### Background

##### Research Objectives, Hypothesis, Design and Methods

##### For clinical trials the protocol should be included as an appendix.

##### Cultural responsiveness

##### Within New Zealand, health research is likely to impact on Māori people and their communities. Consideration should be given to how the research will support indigenous health gains, and demonstrate a commitment to the principles of the Treaty of Waitangi. (HRC Research Ethics Guidelines 2021)

##### Describe the consultation process undertaken.

##### Relevant Previous work by applicant/s

##### References

## Section C – Budget

Anticipated Project Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anticipated Project Completion Date: ­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Provide Details of all Costs (GST exclusive).

##### Justification of Budget.

**Section D – C.V. for Principal Applicant**

Please use the New Zealand MSI standard Curriculum Vitae Template. All of Part 1 and Part 2a should be completed. (Copy and paste the completed C.V. here.)

## Section D – GRACI Grant Administrative Agreement

We the undersigned have read the administrative agreement below and undertake to abide by the conditions of this agreement if GRACI awards a grant to the applicant:

1. GRACI may accept any application in full or part, negotiate with one or any number of applicants, re-advertise for applicants and reject or refuse all or any applications.
2. Successful applicants will be required to enter into a separate agreement with GRACI recording the terms on which the grant is made, including the right to use the award of grants for publicity for the benefit of GRACI.
3. The applicant warrants that the information provided by the applicant to GRACI in relation to the application for a grant is true and correct to the best of its knowledge at the date of the application. The applicant will use their best endeavours to communicate any change in the information.
4. The information requested in this application will be used for the purpose of assessing the proposal. Some information will be used in a non-identifiable form for GRACI purposes. GRACI undertakes to store all proposals in a secure place, and to destroy declined proposals after due process to preserve confidentiality.
5. The host institution agrees and undertakes to bear all risks and claims connected with any activity covered by this application and to indemnify and hold harmless GRACI against any and all liability suits, actions, demands, damages, costs or fees on account of death, injuries to persons or damage to property, or any other losses resulting from or connected with any act or omission performed in the course of the program of the applicant.
6. The host institution agrees and undertakes to support for the duration of the research the work described in this application by making available accommodation, facilities for research and the services necessary for its fulfilment.

##### Principal Applicant

|  |  |  |
| --- | --- | --- |
| Name: | Signed: | Date: |

##### Head of Department (if applicable)

|  |  |  |
| --- | --- | --- |
| Name: | Signed: | Date: |

##### Head of School, Faculty or Hospital (if applicable)

|  |  |  |
| --- | --- | --- |
| Name: | Signed: | Date: |

##### Authorised official on behalf of host institution (University/hospital, if applicable))

|  |  |  |
| --- | --- | --- |
| Name: | Signed: | Date: |

## If the application involves the use of animals or human subjects or in research, please read and sign this section:

## The applicant has read the ‘HRC Research Ethics Guidelines March 2021’, available from the HRC website <https://hrc.govt.nz/> and agrees to abide by the principles outlined in it.

## The undersigned also agrees to provide written evidence before any research procedures commence, that in any study involving animal or human subjects, animal or human materials or personal information, a properly constituted accredited Ethics committee has examined and agreed to the ethics of the proposal outlined in this proposal.

## If minor changes in the research design or procedures have been required for ethical reasons, GRACI must be informed of them.

## 

## The undersigned also undertakes to ensure that all regulatory consents are gained before research commences.

##### Principal Applicant

|  |  |  |
| --- | --- | --- |
| Name: | Signed: | Date: |

##### Head of Department or Host Institution

|  |  |  |
| --- | --- | --- |
| Name: | Signed: | Date: |

**One PDF of this completed application should be emailed to GRACI**: [graci@graci.co.nz](mailto:graci@graci.co.nz)

**DO NOT email through individual documents please.**