1. Research Initiatives Fund (RIF) Collaborative Equipment Grant 2022 Application

New Section

Consider the following before you complete and submit your application:

1. The preferred option is for quotes to be obtained in Australian Dollars to avoid shortfalls in funding. If obtaining a quotation in foreign currency becomes unavoidable, note the following:
   - Provide the conversion rate used at the time the application was submitted.
   - Contingency plans should be developed to pay for any shortfalls arising from resulting fluctuations in currency at the time of purchase.

2. You should engage with Commercial Services to help with the negotiation of competitive pricing and inclusion of extended three-year warranty as part of quotation package.

3. Ensure that a copy of the co-investment approval form is sent to your Academic Division research office.

4. Complete all compulsory fields

2. Lead Applicant Contact Details

* indicates a required field

Applicant Contact Details (all fields must be completed)

**Lead Applicant** *

<table>
<thead>
<tr>
<th>Title</th>
<th>First Name</th>
<th>Last Name</th>
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**Applicant Position** *


**Applicant University of Melbourne (UoM) Email** *

Must be an email address.

**Applicant Primary Phone Number** *

Must be an Australian phone number.
Please enter area code, e.g. (03)

**Applicant FTE Appointment at UoM (must be between 0.5 and 1)** *
FTE must be 0.5 and above

**Academic Division**

Select your Faculty *

Must select Faculty

"Other" option selected for Academic Division (Lead Applicant)

Please specify your host Division below if you did not select an option from the list above.

*Note: Lead applicant must hold at least a 0.5 FTE salaried appointment at the University of Melbourne at the time of the award.*

**Other (Division)** *

Enter Academic Division, including Centre, Department, Institute and lab group

**School (FMDHS)**

Select your host School from the list below

**Lead Applicant School (MDHS)** *

Must select School

**Department within MMS**

Select your host department from the list below

**Lead Applicant Department (MMS)** *

Must select department

**Department within Health Sciences**

Select the host department from the list below

**Lead Applicant Department (Health Sciences)** *

Must select department

**Department within MSPGH**

Select the department from the list below
Lead Applicant Department (MSPGH) *

Must select department

Department within SBS

Select your host department from list below

Lead Applicant Department (SBS) *

Must select department

Department for Research Institutes, Centres and Departments

Select your host department from the list below

Lead Applicant Department (FRICD) *

Must select department

School (Faculty of Science)

Select your host School from list below

Lead Applicant School (Science) *

Must select School

School (FVAS)

Select your host School from list below

Lead Applicant School (FVAS) *

Must select School

School (ABP)

Select your host School from list below

Lead Applicant School-ABP *

Must select school

School (FEIT)

Select your host School from the list below
Lead Applicant School (FEIT) *
Must select School

Department within School of Chemical and Biomedical Engineering
Select your host department from the list below

Lead Applicant Department (CBE) *
Must select department

Department within the School of Electrical, Mechanical and Infrastructure Engineering
Select your host department from the list below

Lead Applicant Department (EEE) *
Must select department

School within the Faculty of Arts
Select your host School from the list below

Lead Applicant School (Arts) *
Must select School

Department within Business and Economics
Select your host department from the list below

Lead Applicant Department (FBE) *
Must select department

Schools/Departments within the Faculty of Fine Arts and Music
Select your host school or department from the list below

Lead Applicant School/Department (Fine Arts and Music) *
Must select School or department

"Other" option selected for School/Department (Lead Applicant)
You selected "other" from the drop down provided for schools or department within your Academic Division. Please give a reason and/or name your host division (e.g. Institute and lab name) below.

Note: Lead applicant must hold at least a 0.5 FTE salaried appointment at the University of Melbourne at the time of the award.

Other *

Word count:
Must be no more than 100 words.

3. Second Applicant Contact Details

* indicates a required field

Second Applicant Details (all fields must be completed)

Second Applicant *
Title First Name Last Name

Second Applicant Position *

Second Applicant Primary Email *
Must be an email address.

Second Applicant Primary Phone Number *
Must be an Australian phone number.

Second Applicant Academic Division

Select your Faculty *
Must select Faculty

"Other" option selected for Academic Division (Second Applicant)

Please specify your host Division below if you did not select an option from the list above

Other (Division) *
Word count: Must be no more than 100 words.

School (FMDHS)
Select your host School from the list below

**Second Applicant School (MDHS) ***
Must select School

Department within MMS
Select your host department from the list below

**Second Applicant Department (MMS) ***
Must select department

Department within Health Sciences
Select the host department from the list below

**Second Applicant Department (Health Sciences) ***
Must select department

Department within MSPGH
Select the department from the list below

**Second Applicant Department (MSPGH)**
Must select department

Department within SBS
Select your host department from list below

**Second Applicant Department (SBS) ***
Must select a department

Department for Research Institutes, Centres and Departments
Select your host department from the list below

**Second Applicant Department (FRICD)***

Must select department

**School (Faculty of Science)**

Select your host School from list below

**Second Applicant School (Science)***

Must select School

**School (FVAS)**

Select your host School from list below

**Second Applicant School (FVAS)**

Must select School

**School (ABP)**

**Second Applicant School-ABP 2***

Must select School

**School (FEIT)**

Select your host School from the list below

**Second Applicant School (FEIT)***

Must select School

**Department within School of Chemical and Biomedical Engineering**

Select your host department from the list below

**Second Applicant Department (CBE)***

Must select department

**Department within the School of Electrical, Mechanical and Infrastructure Engineering**
Select your host department from the list below

**Second Applicant Department (EEE) **

Must select department

School within the Faculty of Arts

Select your host School from the list below

**Second Applicant School (Arts) **

Must select School

Department within Business and Economics

Select your host department from the list below

**Second Applicant Department (FBE) **

Must select department

Schools/Departments within the Faculty of Fine Arts and Music

Select your host school or department from the list below

**Second Applicant School/Department (Fine Arts and Music) **

Must select School or department

"Other" option selected for School/Department (Second Applicant)

You selected "other" from the drop down provided for schools or department within your Academic Division. Please give a reason and/or name your host division (e.g. Institute and lab name) below.

**Other **

Word count:
Must be no more than 100 words.

4. Third Applicant Contact Details

* indicates a required field

Third Applicant Details (all fields must be completed)
Third Applicant *
Title  First Name  Last Name

Third Applicant Position *

Third Applicant Primary Email *

Must be an email address.

Third Applicant Primary Phone Number *

Must be an Australian phone number.

Third Applicant Academic Division

Select your Faculty *

Must select Faculty

"Other" option selected for Academic Division (Second Applicant)

Please specify your host Division below if you did not select an option from the list above

Other (Division) *

Word count:
Must be no more than 100 words.

School (FMDHS)

Select your host School from the list below

Third Applicant School (MDHS) *

Must select School

Department within MMS

Select your host department from the list below

Third Applicant Department (MMS) *
Must select department

Department within Health Sciences

Select the host department from the list below

**Third Applicant Department (Health Sciences)***

Must select department

Department within MSPGH

Select the department from the list below

**Third Applicant Department (MSPGH)***

Must select department

Department within SBS

Select your host department from the list below

**Third Applicant Department (SBS)***

Must select a department

Department for Research Institutes, Centres and Departments

Select your host department from the list below

**Third Applicant Department (FRICD)***

Must select department

School (Faculty of Science)

Select your host School from list below

**Third Applicant School (Science)***

Must select School

School (FVAS)

Select your host School from list below

**Third Applicant School (FVAS)***
School (ABP)

Third Applicant School-ABP 3 *

School (FEIT)

Select your home School from the list below

Third Applicant School (FEIT) *

Department within School of Chemical and Biomedical Engineering

Select your host department from the list below

Third Applicant Department (CBE) *

Department within the School of Electrical, Mechanical and Infrastructure Engineering

Select your host department from the list below

Third Applicant Department (EEE) *

School within the Faculty of Arts

Select your host School from the list below

Third Applicant School (Arts) *

Department within Business and Economics

Select your host department from the list below

Third Applicant Department (FBE) *
Schools/Departments within the Faculty of Fine Arts and Music

Select your host school or department from the list below

Third Applicant School/Department (Fine Arts and Music) *

"Other" option selected for School/Department (Third Applicant)

You selected "other" from the drop down provided for schools or department within your Academic Division. Please give a reason and/or name your host division (e.g. Institute and lab name) below.

Other *

Word count:
Must be no more than 100 words.

5. Equipment Details (all fields must be completed)

* indicates a required field

Equipment Name *

My equipment cost is *
○ $100,000 and above
○ Below $100,000

What is the rationale for a request that does not meet the minimum threshold? *

Word count:
Must be no more than 300 words.

Trade-In of Old Equipment

Are you trading in your old equipment? *
What is the trade-in price/financial return, offered by the vendor for trading in the old equipment *

Word count:
e.g Total Price before trade price is applied = $500K, Special Trade in Price (Financial Return)= $100K, therefore total price of equipment= $400K.

NOTE: Ensure that financial return or trade-in value is presented in the quotation.

Currency used in Quotation

Is the total equipment cost in the quotation in AUD? *
○ Yes
○ No
Quotations in AUD is advised

Quotation in Foreign Currency

If the only option is to obtain a quote in foreign currency, provide a rationale, the total cost in foreign currency and the conversion rate used when submitting this application.

Provide Rationale *

Word count:
Must be no more than 150 words.

Total Equipment Cost in Foreign Currency (excl. GST) *

Must be a number.

Type of Currency *

The conversion rate used to generate 'Cost in AUD' in the table below. *

Must be a number.

Equipment Components and Suppliers

Provide cost of equipment in AUD only (if the quotation was provided in foreign currency then convert to AUD using the conversion rate provided above).
<table>
<thead>
<tr>
<th>Component</th>
<th>Preferred Supplier</th>
<th>Cost in AUD (excl. GST)</th>
<th>Alternate Supplier</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Total Equipment Cost in AUD

**Total equipment cost in AUD (excl. GST)**

$  

This number/amount is calculated.

**Attach PDF of quotes here** *

Attach a file:

Please combine multiple quotes into single PDF and upload here.

**Cash Co-Investment**

<table>
<thead>
<tr>
<th>Contributor’s Name</th>
<th>Amount in AUD</th>
<th>Approver Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

**Total cash co-investment**

$  

This number/amount is calculated.

*Note: Please ensure you have saved your application before proceeding.*

If you haven't already downloaded the Co-Investment Approval Form, follow the link below which will access the University of Melbourne RIF-CEG website.

https://sites.research.unimelb.edu.au/research-funding/researcher-development-schemes/research-initiatives-fund-collaborative-equipment-grant-scheme

**Attach co-investment approval form here (with signatures)** *

Attach a file:
Cost summary

<table>
<thead>
<tr>
<th>Total Equipment Cost (AUD, excl. GST)</th>
<th>Total Cash Co-Investment</th>
<th>Co-Investment Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
<td>$</td>
<td>This number/amount is calculated.</td>
</tr>
</tbody>
</table>

RIF-CEG Cash Request *

$  

Must be a dollar amount.

6. Equipment Justification

* indicates a required field

6.1 Does similar equipment already exist at UoM? *
○ Yes
○ No

6.1a Who has been contacted about accessing this existing equipment and provide location? *

Word count:
Must be no more than 200 words.

6.1b Is there a reason why the existing equipment cannot be utilised? *

Word count:
Must be no more than 200 words.

6.2a The requested equipment is: *
○ New piece of equipment
○ Replacing outdated or decommissioned equipment

6.2b Briefly outline the need for and proposed use of the equipment, including the proportion of usage for research/research training/teaching purposes, the projected utilisation, the expected life of the equipment and how it passes the ‘collaborative test’. *
6.3 Briefly summarise the potential of the equipment to increase University research capability, quality and output, including the user groups and projects that will benefit most from use of the equipment. *

6.4 Does this equipment meet the eligibility requirements of the LIEF Scheme? *
○ Yes
○ No

Please outline why it is not appropriate for the equipment to form part of a LIEF grant application. *

6.5 Has this equipment ever been requested through the Faculty of MDHS Large Equipment Grant Scheme? *
○ Yes
○ No

What was the outcome of the application? *

7. Collaborative Nature of Proposed Use

* indicates a required field
A platform is an organised structure through which an end-user can gain access to equipment, facilities and services without the need for formal collaborations.

It is a way for researchers to access a vast range of technology, expertise and support for research.

7.1 Is the equipment requested for inclusion in an existing platform? *

Select the platform from the list of University platform provided in the drop down box below.

Select University Platform *

If not in the drop down list, enter the name of the platform "Other Platform" was selected.

Provide the name of the platform that will be hosting you equipment.

Note:

A platform is an organised structure through which an end-user can gain access to equipment, facilities and services without the need for formal collaborations.

It is a way for researchers to access a vast range of technology, expertise and support for research.

Other University Platform *

Platform Location and Endorsement

Proposed Equipment Location (building name and room number) *

Attach evidence of endorsement from the hosting Platform Manager and Platform Steering Committee. *

Attach a file:

7.1a Please provide information on why the proposed location is suitable and how access will be managed. *
Word count:
Must be no more than 200 words.

**Host**

Include the name of the equipment custodian, name of research lab and host department/school/faculty/centre.

**Proposed Equipment Location (building name and room number)**

Evidence of support for the proposed location from the relevant host signatory.
Attach a file:

7.1a Please provide information on why the proposed location is suitable and how access will be managed.

Word count:
Must be no more than 200 words.

7.1b Briefly outline the need and expected demand for the equipment. Provide information on users, utilisation and any opportunities for use by industry or external collaborators.

Word count:
Must be no more than 150 words.

7.1c Describe the management plan for the equipment, including staffing and governance, access procedures/system, fee schedule and the technical expertise for operation & maintenance of equipment.

Word count:
Must be no more than 300 words.
8. Operations
* indicates a required field

Operating Costs (in-kind)

<table>
<thead>
<tr>
<th>Operating Expense</th>
<th>Cost in AUD</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

Total in-kind operating costs per annum *

$ Must be a dollar amount.

8.1 Outline how these operating costs will be supported. *

Word count:
Must be no more than 200 words.

Capital Works and Letters of Support
* indicates a required field

9. Capital Works

Is there any building capital work required for the installation of the equipment? *
○ Yes ○ No

Provide details including a description of the work, building/room locations and whether faculty support has been obtained. *

Word count:
Must be no more than 250 words.

10. Letters of Support
Attach letters of support here (a maximum of 3 letters are permitted). These should demonstrate the value and importance of the proposed equipment.

Attach a file:

Please combine letters of support into a single PDF and upload here.