**2024 Cancer Council NSW Online Grant Submission Form**

The purpose of this document is to provide a printable version of the Cancer Council NSW online grant submission form for interested Chief Investigators from the University of Melbourne. This application must be completed and submitted [online](https://www.cancercouncil.com.au/research/for-researchers/project-grant-applications/#consumer-review) (halfway down the page) by the applicant. Cancer Council NSW Project Grants for 2024 are open to all Australian cancer researchers. Chief Investigators are welcome to print this document and create a draft or fill out this form digitally. Upon completion, researchers are encouraged to send this to the Health and Medicine branch of the Research, Innovation and Commercialisation team via email at nhmrc-project@unimelb.edu.au.

**Key dates and deadlines**

* RIC Internal review deadline: **10am Thursday 13 April 2023**
* Final application due to RIC: **10 am Monday 15 May 2023**: Please provide this completed form and the consumer review form to RIC by this date for final compliance checks prior to submission.
* CCNSW submission of Supplementary Questions and Consumer Review responses deadline: **5pm Wednesday 17 May 2023**

Please note that the Cancer Council NSW website allows researchers to save their progress when completing the online submission form. There is an option titled “Save and Resume Later” located at the bottom of the submission form above the progress bar on each page. Clicking on this option will lead to a pop-up message asking if you would like to proceed. By choosing “save and get link” you will be taken to a new window where you will have the option to copy and paste the link or have the link sent directly to your email (your email will need to be entered again regardless of whether you already entered your email in the submission form).

There are 3 parts **required** for researchers to complete the application through the Cancer Council NSW Project Grants via the NHMRC Ideas Grant application:

1. [NHMRC Ideas Grant application](https://www.nhmrc.gov.au/funding/find-funding/ideas-grants). In the Sapphire application, please answer ‘Cancer Council NSW’ with Yes under ***Funding Source***.
2. Supplementary Questions via the [online grant submission form](https://www.cancercouncil.com.au/research/for-researchers/project-grant-applications/#consumer-review), and
3. [Consumer Review form](https://www.cancercouncil.com.au/wp-content/uploads/2023/03/CCNSW-Consumer-Review-Form-2023.doc). Please upload when prompted as part of the online grant submission form.

This form is a University of Melbourne created document that is used by RIC for internal reviews and final compliance checks of Chief Investigators’ completion of the second step, “Supplementary Questions”.

The CCNSW guidelines used to assist with the submission of these grant application can be accessed [here](https://www.cancercouncil.com.au/wp-content/uploads/2022/03/CCNSW-Project-Grants-Guidelines-2023.pdf). Please note that the total budget request must be between $300,000 and $450,000 with a maximum of $150,000 per year.

# Cancer Council NSW Online Grant Submission Form

NHMRC Application ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Which Cancer Council/s are you applying to? \**note that* ***only researchers in SA*** *are eligible to apply to* ***Cancer Council SA***

[ ] Cancer Council NSW

[ ] Cancer Council SA (administered by SAHMRI)

## Chief Investigator A – contact details

Title (Prof, A/Prof, Dr): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Institution: \_\_\_\_\_\_University of Melbourne\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (line 1): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (line 2): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_ Postcode: \_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Lay title and summary of your project

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Summary (**150 words** **maximum**):

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## List of all Investigators

Please list all Chief Investigators and Associate Investigators who will be named on the Cancer Council application, and their Institution. There can be **NO** changes to the list and sequence from the NHMRC listed Chief Investigators.

**The maximum number of Chief Investigators is 10.**

Number of Chief Investigators (up to 10):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator A – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator A – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator B – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator B – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator C – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator C – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator D – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator D – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator E – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator E – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator F – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator F – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator G – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator G – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator H – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator H – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator I – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator I – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator J – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Investigator J – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The maximum number of Associate Investigators is 10.**

Number of Associate Investigators(up to 10):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator A – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator A – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator B – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator B – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator C – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator C – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator D – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator D – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator E – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator E – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator F – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator F – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator G – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator G – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator H – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator H – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator I – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator I – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator J – Name (title, first name and surname):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Investigator J – Primary Institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Administering Institution

Please include name and department address of the Institution’s Research Admin Officer (RAO).

First Name: \_\_\_\_Wade\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_Moore\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department: \_\_ Research, Innovation and Commercialisation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Institution: \_\_\_\_\_ University of Melbourne\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_ ric-medresearch@unimelb.edu.au\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_ 03 9035 7945\_\_\_\_\_\_\_\_\_

Address (line 1): \_\_\_\_\_\_ Level 4, 161 Barry Street\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_ Carlton\_\_\_\_\_\_\_\_\_ State: \_VIC\_\_\_\_\_ Postcode: \_\_\_3053\_

## What tumour type of cancer does your project focus on?

Identify a **maximum** of 3 tumour types where the research will be most relevant. Indicate the degree of relevance (percentage) by using the slider. The total should equal 100%.

Cancer type #1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Degree of Relevance (%): \_\_\_\_\_\_\_\_\_

Cancer type #2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Degree of Relevance (%): \_\_\_\_\_\_\_\_\_

Cancer type #3: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Degree of Relevance (%): \_\_\_\_\_\_\_\_\_

## Relevance to the causes, diagnosis, treatment or prevention of cancer

Please include information on the relevance to cancer in your response, including how you might progress the results of your work and its translation into clinical practice. **(Max 2500 characters)**

*Note. Page 8 & 10 of the Online Grant Submission form will only be prompted if you have selected Cancer Council SA on page 1. If you are prompted to answer “Specific SA state criteria”, please return to page 1 and uncheck the box for Cancer Council SA.*

## Is your application also being considered for funding by the NHMRC and/or Cancer Australia?

[ ] Yes

[ ] No

**NOTE: There are two Scope of Research and Budget sections: one for applicants applying to CCSA and one for applicants applying to CCNSW.**

* Researchers in SA applying for their state funding only must complete the first Scope of Research & Budget section.
* Researchers in SA applying for both their state AND Cancer Council NSW funding must complete both Scope of Research & Budget sections.
* Researchers in ACT, QLD, **Victoria**, Tasmania, WA and NSW applying for Cancer Council NSW funding **must complete the CCNSW: Scope of Research and Budget section.**
* Amounts offered by Cancer Councils vary. Please ensure you adhere to the maximum funding limits offered by the relevant state Cancer Council to which you are applying.

|  |  |  |
| --- | --- | --- |
| **Cancer Council** | **No. of Years** | **Amounts (maximum per year)** |
| Cancer Council NSW | 3 years | $150,000Note there is a minimum request of $300,000 for the life of the grant. |
| Cancer Council SA | Generally, for 1 year | $100,000 |

## NSW: Scope of research and budget

**Project Timeline**

Include a timeline which details the measurable milestones you expect to achieve in each 6-month interval of your funding term. To clearly demonstrate the expected progression of your project, please list every milestone you expect to achieve and when you expect to achieve it, including employment of staff, ethics approval, development of study measures, data collection (eg. expected recruitment numbers within each 6-monthly interval), data analysis, manuscript preparation etc. (**Max 2500 characters**)

**Total Budget in NHMRC application:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Total Budget in Cancer Council NSW application:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Modifications**

What modifications to your project will be required in order for it to fit with the level of funding being offered by CCNSW? If your application is not being considered by NHMRC and/or Cancer Australia, and there will be no modifications to your project, **state N/A**. Otherwise provide details about the aims that will be retained and the aims that will be removed due to the reduced level of funding and/or reduced number of years. Should your project require more than $150,000 one year and less than $150,000 another year, but still fall within the $450,000 limit, Cancer Council NSW will fund the project up to a maximum of $450,000 but spread the funding such that the annual allocation does not exceed $150,000. **(Max 2500 characters)**

**Budget**

* Amounts offered by Cancer Councils vary. Please ensure you adhere to the minimum and maximum funding limits offered by the relevant state Cancer Council to which you are applying. CCNSW Project Grants are valued between $300,000 to $450,000 over three years. There is a minimum budget request of $300,000.
* It is not the intention of CCNSW to enable institutions to make salary savings. Applicants seeking CIA salary support must provide a justification in the field provided at the end of this section.
* If the application is successful, the applicant will be required to provide written assurance from the administering institution that the duration of the CIA’s employment contract exceeds the duration of Project Grant funding requested.

(Note: when you select the number of budget line items, the corresponding number of rows will appear in which to enter budget information. Please enter each item per year. Please only provide a top line budget and group items per year, by category where possible, **20 rows maximum**)

**Number of budget line items:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- |
| **Category****(Personnel, Maintenance or Equipment)** | **Description** | **Year****(1, 2 or 3)** | **Amount:****(AUD)** |
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Justification for salary requests (**Max 2500 characters**)\*

## Ethics and other approvals

Does the research proposal submitted to Cancer Council require/involve:\*

[ ] Human ethics

[ ]  Animal ethics

[ ]  Organisms being genetically manipulated such that they fall under current guidelines issued by the Office of the Gene Technology Regulator

[ ]  The use of carcinogenic or highly toxic chemicals

[ ]  The use of human stem cells

[ ]  The use of animal stem cells

[ ]  No approvals required

## Data Collection

Select the most relevant age group(s)\*

[ ]  Children (0-14)

[ ] Adolescent and Young Adults (15-24)

[ ] Adults (24+)

[ ] All ages

Select the most relevant research area (**select one only**)

[ ] Basic Science

[ ] Clinical Medicine and Science

[ ] Health Services

[ ] Public Health

[ ] Preventative Medicine

[ ] Psychological

Indicate if your project focuses on the following populations or cancers.

[ ] Aboriginal and Torres Strait Islander people

[ ] Culturally and linguistically diverse (CALD)

[ ] Low SES

[ ] Low survival cancers

[ ] Rare Cancers

[ ] Regional and Rural

[ ]  Other:

**Common Scientific Outline**

The Common Scientific Outline (CSO) is an international classification system organized around six broad areas of scientific interest in cancer research to lay the framework for better coordination among research organizations and funding agencies. The following are options for sub-categories:



For a full description of each category please see the following link [here](https://www.icrpartnership.org/cso).

Identify a **maximum** of 3 **sub-categories** that best describes your project. Indicate the degree of relevance (percentage) by using the slider. The **total should equal 100%**

Sub-category #1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Degree of Relevance (%): \_\_\_\_\_\_\_\_\_

Sub-category #2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Degree of Relevance (%): \_\_\_\_\_\_\_\_\_

Sub-category #3: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Degree of Relevance (%): \_\_\_\_\_\_\_\_\_

## Consumer Review

Please click the link attached here: [Consumer Review Form](https://www.cancercouncil.com.au/wp-content/uploads/2023/03/CCNSW-Consumer-Review-Form-2023.doc).

The Consumer Review Form has a specific template and instructions for completing the document. These general instructions include:

* **Maximum length:** 2 pages (any material beyond two pages will be disregarded)
* **Minimum font size:** Arial 10 point
* Do not adjust the margins of the document.
* Please complete the application details in the header.
* The accompanying [Consumer Review Guidelines](https://www.cancercouncil.com.au/wp-content/uploads/2023/03/CCNSW-Consumer-Review-Guidelines-2023.pdf) will assist you to complete this template in a manner that will maximise your chances of funding success. Please refer to the Guidelines before completing this template.
* Furthermore, there are specific instructions relating to each question. Please follow these instructions while completing the document. Delete these instructions and those included in the text boxes below before submitting.
* Upload the completed Consumer Review Form as a single MS Word file using the following file name convention: **App ID\_ConsumerForm\_CIA Surname**, e.g., ‘123456\_ConsumerForm\_Smith

Has the Consumer Review form (including Consumer Declaration) been completed and attached? (Y / N) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_