ELIGIBILITY

* indicates a required field

Eligibility Checklist

Prior to completing the application form please read the **2023 Victorian Cancer Agency Palliative Care Cancer Research Grant guidelines** on the Victorian Cancer Agency <u>website</u> to ensure that you meet the eligibility criteria and that your project is suitable for this funding scheme.

The following checklist is designed to ensure that you meet the eligibility criteria prior to completing an application form.

If you do not fulfil the eligibility criteria detailed below please **DO NOT** continue with this application.

	or New Zealand citizen, or has permanent residency in
Australia at the time of submitting	
	y Victoria, Australia for the majority of the funding period.
	appointment with a Victorian-based Administering
	sed Research Organisation at the time of submission
☐ The proposed project address	ses a specific hypothesis-driven research question/s in
palliative care cancer research.	
	and outcomes that are achievable in the designated
timeframe	
	neligible for funding if the consumer and community
their research proposal.	or applicants indicate that this section is not applicable to
At least 6 choices must be selected.	
Please note: Applicants may only	ly submit one application as Chief Investigator and can be
	naximum of three applications. There are no limitations on
Associate Investigators.	
PROPOSAL OVERVIEW	
* indicates a required field	
maicates a required neid	
Proposal Title *	
	Must be no more than 30 words. This description may be used by
	VCA in public announcements, as such please do not include any
	in-confidence or commercially sensitive information
Lay Description *	

Form Preview

Must be no more than 100 words. Summarise the background, research project and expected outcomes in a lay format so the project can be understood by the general public. This description may be used by VCA in public announcements, as such please do not include any in-confidence or commercially sensitive information.

	Lea	d	Δ	րը	lica	nt	*
--	-----	---	---	----	------	----	---

Title	First Name	Last Name

You are responsible for completing and lodging the application, including seeking agreement for the involvement of all collaborators. Should the grant be funded, you will be responsible for progress and reporting on the project.

One grant will be awarded to the highest ranked application from a rural or regional area that meets appropriate standards for funding. Unless otherwise formally agreed with the Department, the definition of Rural, Regional and Remote areas for this grant opportunity are locations RRMA Classification 3-7.

Will the majority of the research team be based in a rural or regional area of Victoria AND will the majority of participants enrolled in the clinical research reside in a rural or regional area?

O Yes

If yes, please indicate location/s and RRMA classification/s

RESEARCH PROPOSAL

* indicates a required field

Research Proposal

Download the Research Proposal Template (DOC 131KB)

Using this template address each of the headings outlined below, with reference to the selection criteria in the guidelines. Each section has a maximum word count of 800 words. A maximum of 4 Images may be embedded into this document. Please also include references in this document.

Upload a PDF of the completed project description template in the area provided below.

Research Proposal Upload

Attach a file:
The Research Proposal must be saved and uploaded as a PDF. The PDF is to be named Grant Code_ Lead Applicant Surname ResearchProposal (e.g. PCCRG23001 Smith Research Proposal)
Consumer Evaluation Panel Form
Download the Consumer Evaluation Panel Form Template (DOC 156KB)
Using this template address each of the headings outlined below, with reference to the selection criteria in the guidelines. Each section has a maximum word count of 600 words. A maximum of 4 Images may be embedded into this document. Please also include references in this document.
The consumer evaluation panel will only receive this form and will not have access to other sections of your application.
This form will contribute to 40% of the overall score of your application.
Upload a PDF of the completed project description template in the area provided below.
Consumer Evaluation Panel Form Upload * Attach a file:
Only one PDF file can be uploaded for this section. The PDF is to be named Grant Code_Lead Applicant Surname Consumer Evaluation Panel Form (e.g. PCCRG23001 Smith Consumer Evaluation Panel Form)
Participating Research Organisations
Provide a list of all organisations where the research proposal is to be carried out, including the percentage of time allocated to each.
Use the button at the bottom of the section to add more organisations.
Organisation
Department
% allocation
LEAD APPLICANT DETAILS
* indicates a required field
maicates a regulieu nelu

Using this template address each of the headings.

Download the **Research Output Template** (<u>DOC 150KB</u>)

Lead Applicant details

Form Preview

Please provide an outline of your research output which includes all relevant qualifications, previous relevant appointments, achievements, top 5 and total number of relevant publications and other research related activities. This document must not exceed 5 pages with size 10 Arial Font. Research Output documents greater than 5 pages will not be provided to the evaluation panel.

Lead Applicant Research Output *	Attach a file:
Output	
	Only one PDF file can be uploaded for this section. The PDF is to be named Grant Code Lead Applicant Surname Research Output (e.g. PCCRG23001 Lead Applicant Smith Research Output)
Date of birth *	
	DD/MM/YYYY. Used for statistical reporting purposes only.
Gender Identity *	○ Male○ Female○ Prefer not○ I use ato saydifferent term
	Used for statistical reporting purposes only.
Work phone	
	Must be an Australian phone number.
Mobile *	
Email *	
Postal Address *	Address
Postal Address *	Address
	Address Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.
	Address Line 1, Suburb/Town, State/Province, Postcode, and
Organisation *	Address Line 1, Suburb/Town, State/Province, Postcode, and
	Address Line 1, Suburb/Town, State/Province, Postcode, and
Organisation * Department	Address Line 1, Suburb/Town, State/Province, Postcode, and
Organisation *	Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.
Organisation * Department	Address Line 1, Suburb/Town, State/Province, Postcode, and
Organisation * Department	Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Briefly describe in one to two sentences the role that you will

Form Preview

Collaborator

Gender Identity

Do you anticipate any periods of absence during the term of this proposal? *	e.g. sabba should be setting m	atical, long term leav taken into account ilestones, and will be	No Neted absence during the proposal, we, maternity leave, etc. These when planning timelines and e taken into consideration when nent if the grant is funded.
If yes, please provide details.			
Impact of Career Disrupt	ion State	ement	
If applicable, please detail any e Please provide dates and any im evaluation panel to consider.			
Please refer to VCA Funding Rules for more than 200 words.	or the defini	tion of a career disru	uption and career break. Must be
OTHER KEY RESEARCH	PERSOI	NNEL	
* indicates a required field			
The Lead Applicant, Co-Investigates salary from the Grant. Consume remunerated for their contributions salary.	rs (who ma	ay also be Associat	te Investigator(s)) may be
Please provide details of the pro Contact details should be those researchers can be contacted du as needed.	that apply	when the applicat	ion is submitted so that
Co-Investigator(s)/Associ	ate Inve	stigator(s)/Co	nsumer(s)
Detail the role of the person in this application. *	☐ Assoc ☐ Cons At least 1		than 2 choices may be selected. valso be a consumer.
Co-Investigator/	Title	First Name	Last Name

Female

○ Prefer not ○ I use a to say different term

Male

Form Preview

Organisation

Collaborator

	Used for statistical reporting purposes only.
Organisation	Organisation Name
_	
Role in Proposal	
	Briefly describe in one to two sentences the role that the Associate/Co-Investigator/Consumer will play in the research project.
Time spent on proposal (FTE)	Must be a number and no more than 1.
Justification for role in and time commitment to the proposal	
the proposal	Must be no more than 250 words
Co-Investigator Research	Output
Download the Research Outpu	t Template (DOC 150KB)
Using this template address each	h of the headings.
Please note that Associate Inves Research Output template.	tigators and Collaborators are not required to complete the
previous relevant appointments, publications and other research	r research output which includes all relevant qualifications, achievements, top 5 and total number of relevant related activities. This document must not exceed 5 pages h Output documents greater than 5 pages will not be anel.
Please upload one PDF	Attach a file:
that contains Research	
Output for each Co- Investigator in the order listed above.	Only one PDF file can be uploaded for this section. The PDF is to be named Grant Code CIBiosketches (e.g. PCCRG23001 CIBiosketches)
Collaborations	
If the project involves collaborate provide information for each coll	ors other than the investigators named on the application, aboration.
Briefly state the benefits and our organisation.	tcomes expected from collaborating with the person/
Use the button at the bottom rig	ht of the section to add more collaborators if required.

First Name

Last Name

Title

	If applicable
New/Existing	Indicate whether this is a new collaboration, or enhancement of an existing collaboration.
Expected benefits and outcomes	Limit to one or two sentences.

MILESTONES

* indicates a required field

Milestones to Measure Research Progress

The Victorian Cancer Agency (VCA) has a six-month reporting cycle. Provide a list of realistic milestones that can be used to measure research progress for each six-month period. Each milestone should follow the 'SMART' principle (Specific, Measurable, Achievable, Realistic, and Timely), and be directly linked to the aims of the project (around 100 characters). As a guide, it is expected that each reporting period will have between two and six milestones. For eg: "submission of manuscript detailing the outcomes of Aim 1".

An aim must be specified for each Milestone.

Milestones for ethics approvals and staff appointments should be included where relevant. If you are requesting conference attendance in your budget you should provide a milestone, with the name and approximate date of the conference.

Milestones will be part of the funding agreement between the VCA and the administering organisation should the application be successful. The VCA expects that milestones in the application form will be amended based on feedback received from the Scientific and Consumer Evaluation Panels and/or VCA, where appropriate.

In each milestone, please indicate the aim that the milestone is directly related to. Milestones outlining consumer involvement must also be included in each year of every application.

of every application.	inici involvement must uiso be meluded in each year
Please note that your applicat of at least two milestones in e	tion will not proceed to evaluation without inclusion every reporting period.
Milestones 0 - 6 Months	
Milestone 1 *	
Milestone 2 *	

2023 VC	A Palliative (Care Ca	ncer Res	earch Grant
Form Previe	w			

Milestone 3	
Milestone 4	
Milestone 5	
Milestone 6	
Link to objective	
Milestones 7 - 12 Months	
Milestone 1 *	
Milestone 2 *	
Milestone 3	
Milestone 4	
Milestone 5	
Milestone 6	
Milestones 13 - 18 Months	
Milestone 1	
Milestone 2	

Form	Dra	viou.
гонн	P1 (-)	$v \mapsto v$

Milestone 3	
Milestone 4	
Milestone 5	
Milestone 6	
Milestones 19 - 24 Months	
Milestone 1	
Milestone 2	
Milestone 3	
Milestone 4	
Milestone 5	
Milestone 6	
Milestones 25 - 30 Months	
Milestone 1	
Milestone 2	
Milestone 3	

Form Preview

Milestone 4	
Milestone 5	
Milestone 3	
Milestone 6	
Milestones 31 - 36 Months	
Milestone 1	
Milestone 2	
Milestone 2	
Milestone 3	
Milestone 4	
Milestone 5	
Milestone 6	
Clinical Trials	
	e a clinical trial component as defined by the International eveloped by the World Health Organisation:
of humans to one or more health-	ly that prospectively assigns human participants or groups related interventions to evaluate the effects on health be referred to as interventional trials. Interventions

Does the research involve a clinical trial? *

changes, preventive care, etc.

○ Yes ○ No

If yes, what is the target patient recruitment number?

include but are not restricted to drugs, cells and other biological products, surgical procedures, radiographic procedures, devices, behavioural treatments, process-of-care

Must be a number.	
Of these patients, h	ow many will be in Victoria?

PROPOSAL BUDGET

* indicates a required field

Budget Request

Please note: The Budget Request tables only refer to the funding being requested from the Victorian Cancer Agency and not necessarily the overall budget of the project.

Please do not edit the descriptors provided, if you have additional items to those listed, you may add rows using the button and specify them (limit 100 characters), elaborating in the budget justification below.

Please do not modify budget beyond specified cap for salary support and direct research costs.

Only include costs that will be covered by the amount requested from the Victorian Cancer Agency.

All requests should be exclusive of GST. GST will be paid on top of grant amounts where appropriate. This will be determined by your Administering Organisation's GST status. This status must be identified by the financial delegate of your Administering Organisation.

Take into account CPI and salary increases when preparing your budget. Only provide full details of required items in the budget justification.

Salary Support

Provide details for the salary support being requested.

Group positions together. Provide full details of the positions in the budget justification.

	Year 1	Year 2	Year 3
Postdoctoral researcher/			\$
S			
Postgraduate			\$
scholarship/s			
Support staff - research			\$
Support staff -			\$
administration			
Support staff - clinical			\$

Direct Research Costs

Please outline direct research costs in the sections below.

Form Preview

Please note: The VCA reserves the right to allocate funding levels which may be less than those requested in the application, and duration of funding which may differ from that requested.

Group items directly associated with carrying out the research proposal.

	Year 1	Year 2	Year 3
Travel to conduct			\$
research			
Consumables			\$
Equipment			\$
Patient participation			\$
costs			
Sample analysis costs			\$
Software			\$
Survey costs			\$
Transcription costs			\$
Consumer/community			\$
costs			

Enabling Facilities

The VCA has specific targets relating to funding and use of enabling facilities. Please separately itemise requests for funds to access any such facilities.

	Year 1	Year 2	Year 3
Australian Synchrotron			\$
BioGrid			\$
Cancer Council Victoria - Clinical trials infrastructure			\$
Cancer Trials Australia - Clinical trials infrastructure			\$
Clinical trials infrastructure - other organisations			\$
Data management services			\$
Monash Antibodies Technology Facility			\$
Statistical analysis services			\$
Victorian Cancer Biobank			\$
Victorian Cancer Registry			\$
Victorian Centre for Functional Genomics			\$
Victorian Life Sciences Computational Initiative			\$

Other Research Items

Form Preview

Summarise costs for other expenses not directly associated with carrying out the research proposal, for example attendance at conferences or relevant workshops, preparation for accreditations/regulatory affairs compliance, utility costs, accommodation, etc.

	Year 1	Year 2	Year 3	
Accreditation costs			\$	
Attendance at conferences/workshops			\$	
Ethics approval costs			\$	
Publication costs			\$	
Staff training/education			\$	
Total costs				
Year 1 *				
Must be a whole dollar a] mount. Note: plea	se ensure the total cost is	correctly calculated. The tot	al

Must be a whole dollar amount. Note: please ensure the total cost is correctly calculated. The total amount requested cannot be amended once the application has been submitted.

Year 3

Year 2

Must be a whole dollar amount. Note: please ensure the total cost is correctly calculated. The total amount requested cannot be amended once the application has been submitted.

Total funding requested from the Victorian Cancer Agency *

amount requested cannot be amended once the application has been submitted.

This number/amount is calculated.

Duration of the research project (in months) *

Enter a number only for the planned duration of the research project (in months). This must not exceed 36 months, otherwise the application will be deemed ineligible.

Does the total funding sought from the VCA budget cover all the proposal costs? \bigcirc Yes \bigcirc No

If no, provide details of the costs not covered and how they will be met, including the source/s of funding.

The VCA will only provide funding to applicants who can confirm that they have not already received funding from other sources for this specific proposal. If this proposal is successful,

Form Preview

the VCA must be informed of any other funding received for this specific proposal for its duration. This could affect the funding provided by the VCA.

Budget Justification

Provide details of items requested in each budget category. Fully justify each item in terms of need and cost. It is not sufficient to simply list item costs. The justification must explain why the item is required, how many are needed, and, if relevant, for what length of time.

Salary Support

Provide full details of each position requested, including number, level and FTE. Include an explanation of how the salary level requested is in line with the required skills, experience and time commitment to the proposal. Items not adequately justified may not be funded by the VCA.

*	
Word count: Must be no more than 500 words.	
Direct Research Costs	
Provide a full list of items requested, including details of queerms of its contribution to the proposal.	antities required. Justify ea
Where a large piece of equipment is requested, justification existing equipment is not available, or is insufficient for the requested should be based on quotations obtained from su costs where relevant (do not include quotes with your appl	needs of the proposal. Am ppliers, including installation
*	
Word count:	
Must be no more than 500 words.	
Enabling Facilities	
Provide details of the need to access enabling facilities, and facilities.	d the costs of using these
*	
Word count:	

Must be no more than 500 words.

Other Research Items	
Justify the need for other expenditure, not directly related to carrying out the research proposal. Detail any costs involved.	ì
*	
Word count: Must be no more than 500 words.	
ADDITIONAL INFORMATION	
* indicates a required field	
Ethics	
Does the research proposal require approval from a human research ethics committee? *	
○ Yes ○ No	
If yes, please provide details.	
Must be no more than 200 words	
Integrated Cancer Services	
Integrated Cancer Services (ICS) are partnerships between health services to achieve coordinated planning and improvement of cancer services across specified geographic regions.	2
Will the research be carried out in conjunction with one or more ICS? * ○ Yes ○ No	
If yes, at which ICS will the research predominantly be carried out (if known) □ NEMICS □ GRICS □ GICS □ SMICS □ LMRICS □ HRICS □ WCMICS □ BSWRICS □ PICS)?
Tumour stream activity	

Indicate which tumour stream/s the proposed research is addressing. If the research is

across all tumour streams, please tick "All types".

Under the research classifications section of the application you will be asked to indicate the percentage of time to be spent on the tumour stream/s you select. The total across all streams must add up to 100%. You will also be asked to specify the type/s of tumour/s where there is more than one option provided for the stream.

* ☐ Genitourinary ☐ Colorectal	☐ Lung ☐ Skin	☐ Head and neck☐ Central nervous system
□ Breast□ Haematological	□ Upper gastrointesting□ Gynaecological	
RESEARCH CLASSIFIC	CATIONS PART 1	
		Fumour stream activity' question oting to complete this page.
		mour stream. e.g. For 50% enter add up to 100%. Specify the type/s
All types of tumour str	eams	
% of time		
Breast tumour stream		
% of time		
Central nervous syster	n tumour stream	
% of time		
Colorectal tumour stre	am	
% of time	Type/s □ Colon □ Rectal	
Genitourinary tumour	stream	
% of time	Type/s ☐ Prostate ☐ Bladder ☐ Kidney	

	☐ Testis☐ N/A
Gynaecological tumour stre	am
% of time Must be a number.	Type/s Ovary Uterus Cervical Vagina N/A
Haematological tumour stre	eam
% of time Must be a number.	Type/s Lymphoma Leukaemia Myeloma
Head and neck tumour stre	am
% of time Must be a number.	Type/s ☐ Head ☐ Neck ☐ N/A
Lung tumour stream	
% of time Must be a number.	Type/s ☐ Small cell lung cancer ☐ Non-small cell lung cancer ☐ Mesothelioma ☐ N/A
Skin tumour stream	
% of time Must be a number.	Type/s ☐ Melanoma ☐ Non-Melanoma ☐ N/A
Upper gastrointestinal tumo	our stream
% of time Must be a number.	Type/s Oesophagus Stomach Pancreas Hepatobiliary N/A
Other tumour streams	
% of time Must be a number.	Type/s Neuroendocrine system Sarcoma Rare III-defined/unknown origin N/A

Total tumour stream time allocated

Total tumour stream time allocated
This number/amount is calculated.
RESEARCH CLASSIFICATIONS PART 2
Areas of cancer research being addressed
Indicate the area/s of cancer research being addressed using the <u>Common Scientific Outline</u> (CSO) categories listed below. For each CSO area being addressed, enter the percentage of time being spent on it, e.g. For 50% enter 50 (not 50% or 0.5). Leave all areas not being addressed blank. The total from all seven categories combined must add up to 100%.
Biology
Research included in this category looks at the biology of how cancer starts and progresses as well as normal biology relevant to these processes.
1.1 Normal Functioning
1.2 Cancer Initiation: Alterations in Chromosomes
1.3 Cancer Initiation: Oncogenes and Tumour Suppressor Genes
1.4 Cancer Prognosis and Metastasis
1.5 Resources and Infrastructure Related to Biology
Biology Total
This number/amount is calculated.
Aetiology
Research included in this category aims to identify the causes or origins of cancer - genetic, environmental, and lifestyle, and the interactions between these factors.
2.1 Exogenous Factors in the Origin and Cause of Cancer

2.2 Endogenous Factors in the Origin and Cause of Cancer
2.3 Interactions of Genes and/or Genetic Polymorphisms with Exogenous and/or Endogenous Factors
2.4 Resources of Infrastructure Related to Aetiology
Aetiology Total
This number/amount is calculated.
Prevention
Research included in this category looks at identifying interventions which reduce cancer risk by reducing exposure to cancer risks and increasing protective factors. Interventions may target lifestyle or may involve drugs or vaccines.
3.1 Interventions to Prevent Cancer: Personal Behaviours (Non-Dietary) that Affect Cancer Risk
3.2 Dietary Interventions to Reduce Cancer Risk and Nutritional Science in Cancer Prevention
3.3 Chemoprevention and other medical interventions
3.4 Vaccines
3.5 Complementary and Alternative Prevention Approaches
3.6 Resources and Infrastructure Related to Prevention
Prevention Total
This number/amount is calculated.

Early Detection, Diagnosis and Prognos	n, Diagnosis and Prognosis	arly Detection,
--	----------------------------	-----------------

Research included in this category focuses on identifying and testing cancer markers and imaging methods that are helpful in detecting and/or diagnosing cancer as well as predicting the outcome or chance of recurrence.

4.1 Technology Development and/or Marker Discovery
4.2 Technology and/or Marker Evaluation with Respect to Fundamental Parameters of Method
4.3 Technology and/or Marker Testing in a Clinical Setting
4.4 Resources and Infrastructure Related to Early Detection, Diagnosis or Prognosis
Early Detection, Diagnosis and Prognosis Total
This number/amount is calculated.
Treatment
Research included in this category focuses on identifying and testing treatments administered locally (such as radiotherapy and surgery) and systemically (treatments like chemotherapy which are administered throughout the body) as well as non-traditional (complementary/alternative) treatments (such as supplements, herbs). Research into the prevention of recurrence is also included here.
5.1 Localised Therapies - Discovery and Development
5.2 Localised Therapies - Clinical Applications
5.3 Systematic Therapies - Discovery and Development
5.4 Systematic Therapies - Clinical Applications

5.5 Combinations of Localised and Systematic Therapies

5.6 Complementary and Alternative Treatment Approaches
5.7 Resources and Infrastructure Related to Treatment and the Prevention of Recurrence
Treatment Total
This number/amount is calculated.
Cancer Control, Survivorship and Outcomes Research
Research included in this category includes a broad range of areas: patient care and pair management; tracking cancer cases in the population; beliefs and attitudes that affect behaviour regarding cancer control; ethics, education and communication approaches fo patients and health care professionals; supportive and end-of-life care; and health care delivery in terms of quality and cost effectiveness.
6.1 Patient Care and Survivorship Issues
6.2 Surveillance
6.3 Population-based Behavioral Factors
6.4 Health Services, Economic and Health Policy Analyses
6.5 Education and Communication Research
6.6 End-of-Life Care
6.7 Research on Ethics and Confidentiality
6.8 Resources and Infrastructure Related to Cancer Control, Survivorship and Outcomes Research

Cancer Control, Survivorship	and Outcomes Research Tota	ı
This number/amount is calculated.		
Overall Total (%)		
Overall Total		
This number/amount is calculated. The total from all seven categories c	ombined must add up to 100%.	
ADMINISTERING ORGAN	IISATION	
* indicates a required field		
Administering Organisation	on details	
The Administering Organisation is Agreement in the case of success be responsible for ensuring the conditions of the Victorian Cance the requirements of the VCA's AcRules). The Applicant must have a formal	oful applications. The Administeri ompletion of the research, and m r Agency Funding Rules (DOC 42 Iministering Organisations Policy	ng Organisation will nust adhere to the 8KB), including meeting (Section 8 of the Funding
Organisation *		
Organisation's ABN *		
	The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.	
Information from the Australian Business Register		
	ABN	
	Entity name	
	ABN status	
	Entity type	
	Goods & Services Tax (GST)	
	DGR Endorsed	
	ATO Charity Type	More information
	ACNC Registration	
	Tax Concessions	

Form Preview

	Main business location		
Department			
Web address			
Grant Officer *	Title	First Name	Last Name
		dministration Officer at thi administer funds, if known	
Phone *			
Email			
Address *	Address		
	Address Line Country are	e 1, Suburb/Town, State/Pr required.	ovince, Postcode, and
Authorised Signatory *	Title	First Name	Last Name
	The person authorised to sign research contracts on behalf of the Administering Organisation. For universities, this may be the Deputy Vice-Chancellor (Research) or research office head, or equivalent, or delegate; for hospitals, it is normally the Chief Executive Officer or equivalent, or delegate; for Research Institutes, the Director or equivalent, or delegate; for an Australian company, two Directors or a Director and company Secretary, or in the case of a proprietary company, a sole Director.		
Position *			
Is the Research Organisation	different fi		g Organisation? *
O Yes The Research Organisation is where	the research	O No	

RESEARCH ORGANISATION

* indicates a required field

Research Organisation details

Form Preview

The organisation where the resear	rch will be c	onducted.		
Organisation *				
Department				
	Address Address Line Country are r	1, Suburb/Town, State/Pro equired.	ovince, Postcode, and	
Contact person *	Title	First Name	Last Name	
Phone *				
Email *				

CERTIFICATIONS

* indicates a required field

Privacy Notice

How is your personal information used?

The Victorian Cancer Agency (VCA) is part of the Department of Health (we/us/department) and we are committed to protecting the privacy of your information. Your personal information will be handled in accordance with the requirements of the Privacy and Data Protection Act 2014 (Vic). The department will use, access and disclose your information for the purposes of the assessment of your application and for purposes connected with the making of any grants and administration of the research funding. The department may also disclose details regarding the research to stakeholders, such as your name, the Administering and/or Research Organisation, project title and lay description on the VCA website or to the public in press releases. However, information published does not typically identify you without your consent. The department will not disclose personal information for a secondary purpose, unless authorised by you or authorised by law.

The department may also use your personal information for subsequent funding rounds including where you have been unsuccessful in the current application.

You agree and acknowledge that you have sought appropriate consents from third parties for any personal information provided in your application.

You may withdraw your application at any time. If you choose to withdraw this application, you will not be eligible to have your research fellowship status assessed until a further application is submitted.

Who has access to your personal information?

In order to assess your application, departmental staff and evaluation panel members, independent readers and assessors requested to provide advice, will access and share the information contained in your application for the purpose mentioned above.

Who to contact in relation to this application?

To request access to the personal information that we hold about you or request a correction, please email <u>victorian.canceragency@health.vic.gov.au</u> for further information.

Certification by the Applicant

	containe and I und informat applicati research accordar agreeme the Depa Cancer A I hav for their applicati I hav proposal I con persons I hav residenc applicati Confirm y	d in this application derstand that the pro- derstand that the pro- ion may attract subsion is successful I und a project as detailed ince with the terms are the between the Admartment of Health act agency. The sought agreement involvement in the ron. The not received funding from any other funding from any other funding sent to this proposal who may remain and the read and agree to an Australian citizen y status in Australia on. The court certification by tick	being peer-reviewed by onymous. the Privacy Notice above. or have permanent at the time of submitting the sing each box.
Name *	Title	First Name	Last Name
Date *	DD/MM/Y	YYY	

Instructions for obtaining certifications

You are required to submit a certification by the Administering Organisation and a certification by the Head of the Research Organisation. **Before proceeding, all other sections of the application must be complete.**

To provide the certifications:

- 1.Use the application navigation to go the the next page (Review).
- 2. The application will be displayed on that page. Ensure all of the information other than the two certifications is accurate and complete.

Form Preview

- 3.Download a PDF version of the application by clicking the 'Download PDF' button that appears with the navigation buttons at the top and bottom of the page.
- 4. Save and close the application.
- 5.Provide the PDF copy of the application and the Victorian Cancer Agency Funding Rules (DOC 428KB) together with the certification form (provided below) for the appropriate person to sign.
- 6.Once the certification has been signed, a copy must be uploaded under the relevant section below. The application can then be submitted.

All signatures must be obtained prior to the submission of the application to the VCA. Electronic signatures will be accepted.

Certification by the Administering Organisation

The certification must be signed by the relevant delegate of the Administering Organisation. This should be the Director of the organisation's research office, or equivalent or delegate.

You can download the certification as either a PDF or Microsoft Word document:

Certification by the Administering Organisation (DOC 143KB)

Once the certification has been completed, upload it below as a PDF.

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The certification must be signed by the relevant delegate of the Research Organisation. This should be the Director of the organisation's research office, or equivalent or delegate.

PCCRG23001Cert AO)

This is the organisation where the majority of the research will be based, and/or from which the research will be co-ordinated, and may be the same as the Administering Organisation.

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