Applications are now invited for a Conjoint Grant for research in Otorhinolaryngology or the related fields of biomedical science.

A Conjoint Grant will have shared project leadership, promote collaborations between clinical and basic researchers, and build further capacity that advances research towards an improvement in clinical practice.

The Foundation does not wish to be too prescriptive in the ways that this shared leadership, collaboration and outcome will be achieved. Applications will be favoured where there are at least two chief investigators, one of who is involved in clinical practice and has a record of clinically-relevant research achievement, and one who has a PhD and a track record in basic research.

A Conjoint Grant will be awarded for a period of up to three years and must be conducted in Australian and/or New Zealand institutions.

The annual level of support will be up to AUD125,000, all inclusive.

Closing Date: 22 October 2014

Further details concerning the above award together with the current application form can be obtained from:-

The Executive Officer
The Garnett Passe and Rodney Williams Memorial Foundation
Suite 8.03
372-376 Albert Street
EAST MELBOURNE  VIC  3002

P +61 3 9419 0280  F +61 3 9419 0282  E gprwmf@bigpond.net.au
INSTRUCTIONS TO APPLICANTS

Applications open on 27 August 2014 and close at 17.00 (AEDT) on 22 October 2014.

Late applications will not be accepted.

An applicant should read all instructions and other accompanying documentation, and consult with the Administering Institution’s Research Office (or its equivalent) before contacting the Foundation for assistance.

An applicant is required to submit an original application and six (6) copies in the following format:-

(i) the font used must be Times New Roman and at least 12 point;
(ii) the line spacing must be set to single;
(iii) the back of the form must not be used nor any reduction process as a means of obtaining additional space; and
(iv) the original application and copies must be submitted on standard A4 paper.

DO NOT STAPLE OR BIND APPLICATION MATERIALS

DO NOT COPY BACK TO BACK

An applicant is responsible for providing the relevant forms to the intended Head of Department(s), intended Supervisor and/or Referee(s), as the case may be, and for ensuring that all are fully aware that their reports must be forwarded directly to the Foundation by no later than 17.00 (AEDT) on 22 October 2014.

Referees are invited to submit a report about the research proposal, including comments on the following:-

(a) whether the investigators have the knowledge, skills and creativity to pursue the research that has been proposed;
(b) whether a genuine collaboration exists or is emerging;
(c) whether the proposed research will lead towards an improvement in patient care, diagnosis and/or treatment; and
(d) is there any particular work, which has already been done, that would make the investigators worthy of this award?

Referee reports from experts other than the investigators’ supervisors, mentors, colleagues and/or collaborators may be expected to carry more weight in the assessment process.
Reports may be addressed, faxed or emailed to:-

The Executive Officer
The Garnett Passe and Rodney Williams Memorial Foundation
Suite 8.03
372-376 Albert Street
EAST MELBOURNE VIC 3002

P +61 3 9419 0280 F +61 3 9419 0282 E gprwmf@bigpond.net.au
THE GARNETT PASSE AND RODNEY WILLIAMS MEMORIAL FOUNDATION

Conjoint Grant

TERMS AND CONDITIONS OF AWARD

Name of Award
The Garnett Passe and Rodney Williams Memorial Foundation Conjoint Grant

Field(s)
Otorhinolaryngology or the related fields of biomedical science

Purpose
The purpose of the award is to promote collaborations between clinical and basic researchers, and build further capacity that advances research towards an improvement in clinical practice.

Eligibility
An applicant must be able to demonstrate that a genuine collaboration exists or is emerging and that there is a high probability the proposed research will lead towards an improvement in patient care, diagnosis and/or treatment.

Applications will be favoured where there are at least two chief investigators, one of who is involved in clinical practice and has a record of clinically-relevant research achievement, and one who has a PhD and a track record in basic research.

Investigators
The role and contribution of all investigators must be described in the application.

Chief Investigators A and B
The CIA is the project leader, who takes the lead role in the conduct of the proposed project, and is the investigator who takes the responsibility for preparation of the budget, completion and lodgement of the application, compliance and reporting.

The CIB is the primary collaborator on the project.
**Other Investigators**

An individual, who is not an Australian citizen, New Zealand citizen or an Australian or New Zealand Permanent Resident, is eligible to apply for a grant as a non-salaried investigator.

**Citizenship**

An applicant must be an Australian citizen, New Zealand citizen or an Australian or New Zealand Permanent Resident.

**Selection**

All applications will be assessed and ranked by the Board, particularly on how well the application meets the object of the Foundation, which is to advance the Specialty of Otorhinolaryngology and the related medical, surgical and paramedical fields in Australia and New Zealand.

The Board may seek external advice and/or additional referee reports to assist in its deliberations.

Short-listed applicants may be interviewed as part of the assessment process. In such cases, reasonable travel and accommodation expenses will be reimbursed.

The Board may exercise discretion as to whether or not a grant is awarded and may not award any, if such a course is warranted.

The deliberations of the Board will remain confidential.

**Commencement Date**

The grant must commence on or before 30 June 2015. If the CIA wishes to defer commencement of the grant beyond this date, a request justifying the deferral must be submitted in writing to the Board, through the Administering Institution’s Research Office (or its equivalent), prior to 1 June 2015.

**Term**

A grant will be awarded for a period of up to three years.

**Extensions**

In limited exceptional circumstances, requests to extend the duration of a grant may be approved. Exceptional circumstances would normally be for events outside the CIA’s control but does not include situations relating to the progress or success of experiments.
In all cases, requests to extend a grant must be submitted in writing to the Board. Requests must be supported in writing by the CIA’s Head of Department and with the approval of the Administering Institution’s Research Office (or its equivalent).

**Funding**

The annual level of support will be up to AUD125,000, all inclusive.

The Foundation does not fund institutional overheads, administrative charges and other indirect costs of research.

Funding is contingent on the continuing employment of the CIA and CIB over the term of the grant. This requirement may be waived in special circumstances (e.g. CIs who have retired but remain research active).

No additional claims may be made on the Foundation over and above the annual level of support.

**Administration**

The proposed project must be conducted in Australian and/or New Zealand institutions. Elements of the project can be undertaken overseas (e.g. data collection) but the CIA and project must be both based and located at an Australian and/or New Zealand Institution.

**Personnel**

The Foundation does not act as an employer and will not be responsible for any claims under statute or common law nor will it indemnify the Administering Institution against any claim for compensation or against any other claim for which that institution may be responsible.

**Additional Duties**

An investigator is permitted to undertake additional clinical, consulting, teaching and/or other duties during the term of the grant.

**Equipment**

The ownership of any equipment purchased or created wholly or partly with the funding provided under this award shall be vested in the Administering Institution.

The Foundation is to be notified by the Administering Institution if the CIA moves to another institution during the term of the grant and a transfer of ownership is required.
**Payment of funds**

The funds will be paid to the Administering Institution.

Payment will be made six-monthly or annually in advance in respect of all items of expenditure other than equipment and conference attendance, for which payment will be made in full at the commencement of the appropriate year.

The first payment will be made at the *Commencement Date* provided the funding agreement and necessary ethical clearances are in place.

An amount equivalent to 10% of the last year’s funding will be retained until the receipt of the final report.

**Goods and Services Tax**

The Foundation will not be paying any additional amount in respect of the Goods and Services Tax ("GST").

The Foundation recommends that the Administering Institution seek professional taxation advice in relation to its GST obligations.

**Use of funds**

The Administering Institution is required to use the funds exclusively for the project as detailed in the investigators’ application.

The Foundation is to be notified by the Administering Institution if there is a desire or intention to modify the project’s title, aim(s) and/or research plan. Reasonable modifications will be permitted provided that they receive the approval of the Administering Institution.

Change to an unrelated project must be submitted to the Foundation for formal reconsideration after approval has been gained from the Administering Institution. Such change must be as relevant to Otolaryngology as the original project.

**Accountability**

The Administering Institution is required to submit an annual statement of income and expenditure from the *Commencement Date*.

The statement is to be submitted no later than sixty (60) days after the due date.

The Foundation may, at any time by written notice, request the Administering Institution to submit an additional statement in the form and containing the information requested by the Foundation within forty-five (45) days after that request has been made.
The control of expenditure is to be governed by the normal policies and procedures of the Administering Institution. The Foundation accepts no responsibility, financially or otherwise, for expenditure (or liabilities arising out of such expenditure) or liabilities arising out of the investigators’ work other than those specifically referred to in the funding agreement.

**Reporting**

The CIA is required to submit a six-monthly report from the Commencement Date.

A progress report is to be submitted no later than thirty (30) days after the due date. A final report is to be submitted no later than sixty (60) days after the due date.

The Foundation may, at any time by written notice, request the CIA to submit an additional report in the form and containing the information requested by the Foundation within forty-five (45) days after that request has been made.

**Acknowledgements**

The Foundation is to be acknowledged in any correspondence, public announcement, advertising, publication or other material relating to the grant.

**IP and Commercialisation**

The Foundation is to be notified by the Administering Institution of any patents arising from the grant together with the results of any research that is to be commercially developed.

**Termination**

The Foundation may, at any time by written notice, immediately terminate the grant if, in its reasonable opinion, an investigator has not fulfilled the conditions of award or has acted in a manner that is detrimental to the advancement of the Specialty of Otorhinolaryngology and the related medical, surgical and paramedical fields in Australia or New Zealand.

The Foundation will reimburse the Administering Institution for any reasonable costs it incurs that are directly attributable to the termination of the grant.

**Privacy Policy**

The Foundation takes reasonable steps to protect the information it holds from misuse or loss and from unauthorised access, modification or disclosure.

An investigator has the right to access his/her personal information and to have it corrected if it is inaccurate, incomplete or out-of-date.
Change in Conditions

The grant is awarded subject to the conditions at the time of the award.
APPLICATION FORM

Closing Date: 22 October 2014

Please read all instructions and other accompanying documentation before completing the application form. Failure to provide the necessary information could prejudice the success of the application.

An original application and six (6) copies should be addressed to:-

The Executive Officer
The Garnett Passe and Rodney Williams Memorial Foundation
Suite 8.03
372-376 Albert Street
EAST MELBOURNE VIC 3002

1. PROJECT TITLE
   Be brief, precise and informative to workers outside your field. Do not exceed the space provided.

2. CHIEF INVESTIGATOR A / PROJECT LEADER / APPLICANT

   Title, Given Names and Surname
   (Indicate Dr/Mr/Mrs/Ms/Miss/etc.) ____________________________

   Full postal address

   ___________________________________________________________

   ___________________________________________________________

   ___________________________________________________________

   Telephone (   ) __________________________

   Facsimile (   ) __________________________

   Mobile __________________________

   Email ___________________________________
3. Date of Birth ____________

4. Summary of curriculum vitae, commencing at tertiary level, a concise version of which must be attached to this application. **DO NOT EXCEED THE SPACE ALLOCATED BELOW OR THE TEN (10) PAGE LIMIT FOR THE CONCISE VERSION OF THE CURRICULUM VITAE.**

(a) Academic qualifications (i.e. undergraduate, honours and other degrees)

(b) Clinical qualifications or training (if any)

(c) Research experience

(d) Professional skills

(e) Publications, prizes, lectures etc.
5. Current position

(a) Appointment held

(b) Date of Appointment

(c) Salary AUD (if salary support is being requested)

(d) Department and Institution

(e) Head of Department

6. Current grants from all sources. Please indicate funding body, title of project, commencement date, duration and amount.

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

7. Applications pending or to be submitted this year. Please indicate funding body, title of project, duration and amount.

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

8. Average number of days per month to be devoted to the project

9. Details of anticipated periods of absence during the project (other than annual leave)

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
10. **CHIEF INVESTIGATOR B / PRIMARY COLLABORATOR**

   **Title, Given Names and Surname**
   (Indicate Dr/Mr/Mrs/Ms/Miss/etc.)
   ____________________________________________

   **Full postal address**
   _______________________________________________________________________
   _______________________________________________________________________
   _______________________________________________________________________

   **Telephone**
   ( ) _______________________

   **Facsimile**
   ( ) _______________________

   **Mobile**
   _______________________

   **Email**
   ____________________________________________

11. **Date of Birth** ____________

12. **Summary of curriculum vitae, commencing at tertiary level, a concise version of which must be attached to this application. DO NOT EXCEED THE SPACE ALLOCATED BELOW OR THE TEN (10) PAGE LIMIT FOR THE CONCISE VERSION OF THE CURRICULUM VITAE.**

   (a) **Academic qualifications (i.e. undergraduate, honours and other degrees)**

   (b) **Clinical qualifications or training (if any)**

   (c) **Research experience**
(d) Professional skills

(e) Publications, prizes, lectures etc.

13. Current position

(a) Appointment held ____________________________________________

(b) Date of Appointment __________

(c) Salary AUD (if salary support is being requested) ____________

(d) Department and Institution

____________________________________________________________________

____________________________________________________________________

(e) Head of Department

____________________________________________________________________

14. Current grants from all sources. Please indicate funding body, title of project, commencement date, duration and amount.

____________________________________________________________________

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15. Applications pending or to be submitted this year. Please indicate funding body, title of project, duration and amount.

____________________________________________________________________

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____________________________________________________________________

16. Average number of days per month to be devoted to the project __________

17. Details of anticipated periods of absence during the project (other than annual leave)

____________________________________________________________________

____________________________________________________________________

18. **OTHER INVESTIGATORS**
List the names, qualifications and affiliations of all other investigators. Please indicate their involvement in the project both from a technical and commitment perspective.
19. Name and contact details of the referees from who reports have been sought

(i) ________________________________________________________________

_______________________________________________________________

(ii) ______________________________________________________________

_______________________________________________________________
20. **DETAILED BUDGET** (Up to AUD125,000 per annum for a period of 3 years)

The following budget is submitted for the consideration of the selection committee:

<table>
<thead>
<tr>
<th>Item of expenditure</th>
<th>1st year</th>
<th>2nd year</th>
<th>3rd year</th>
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<tbody>
<tr>
<td><strong>Personnel</strong></td>
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<td>Chief Investigator A</td>
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<td>On-costs</td>
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<td>Chief Investigator B</td>
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<td>Research Assistant</td>
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<td><strong>Equipment</strong></td>
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<td><strong>Consumables</strong></td>
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<td><strong>Other Expenses</strong></td>
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<td><strong>TOTAL</strong></td>
<td>$</td>
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</tbody>
</table>

I certify that the classifications quoted for personnel are in accordance with the employment practices adopted at the institution and that the budget is fair and reasonable.

Signature of Chief Financial Officer:  
Date:

Name (Block Letters):

Title:

Institution:
21. AIMS OF PROJECT
List the specific aims and potential significance of the project. If hypotheses are to be tested, they should be clearly stated.
22. DEMONSTRATION THAT A GENUINE COLLABORATION EXISTS OR IS EMERGING AND THAT THERE IS A HIGH PROBABILITY THE PROPOSED RESEARCH WILL LEAD TOWARDS AN IMPROVEMENT IN PATIENT CARE, DIAGNOSIS AND/OR TREATMENT.
23. BACKGROUND AND RESEARCH PLAN
Under the above headings describe:
(a) the background to the project, including key references to the work of other scientists relevant to the project; and
(b) the proposed study, experiments and methods to be used.

The description should be explicit and succinct. DO NOT EXCEED THE FOUR (4) PAGES PROVIDED - ADDITIONAL MATERIAL WILL NOT BE CONSIDERED.
BACKGROUND AND RESEARCH PLAN (Cont.)
BACKGROUND AND RESEARCH PLAN (Cont.)
BACKGROUND AND RESEARCH PLAN (Cont.)
24. ETHICAL AND HAZARDOUS IMPLICATIONS OF THE PROJECT
This should be completed in all cases where the application relates to a specific research project or projects. It need not be completed if the application is solely for a major item(s) of equipment (e.g. ultracentrifuge, computer etc.) which would be used on a number of projects over a period of time.

The project involves:

(a) EXPERIMENTATION ON HUMAN SUBJECTS
(b) EXPERIMENTATION ON ANIMALS
(c) The use of Potent CARCINOGENS or TERATOGENS
(d) The use of IONISING RADIATION
(e) Non-exempt RECOMBINANT DNA work

25. CERTIFICATION BY APPLICANT
I certify that (a) all the details in this application are correct and (b) I understand the Terms and Conditions of Award that pertain to The Garnett Passe and Rodney Williams Memorial Foundation Conjoint Grant.

Signature: ......................................................... Date: ..............

26. CERTIFICATION BY APPLICANT’S HEAD OF DEPARTMENT
I certify that (a) the project is appropriate to the general facilities in my department, (b) I am prepared to have the project carried out in my department and (c) similar equipment to that requested in this application is not available for the project within my department or elsewhere in the institution.

Name (Block Letters): .................................................................

Title: ..............................................................................................

Institution: .....................................................................................

Signature: ................................................................. Date: ..............

27. CERTIFICATION BY AN APPROPRIATE REPRESENTATIVE OF THE ADMINISTERING INSTITUTION (E.G. DIRECTOR OF RESEARCH OFFICE OR CHIEF FINANCIAL OFFICER)
I certify that (a) this request satisfies all the requirements of the institution and (b) the institution is prepared to administer the grant if this application is successful.

Name (Block Letters): .................................................................

Title: ..............................................................................................

Institution: .....................................................................................

Signature: ................................................................. Date: ..............
THE GARNETT PASSE AND RODNEY WILLIAMS MEMORIAL FOUNDATION

Conjoint Grant

REFEREE’S REPORT

Closing Date: 22 October 2014

IN CONFIDENCE

Application for an award by ____________________________________________
of (institution) _______________________________________________________
Project Title __________________________________________________________
...................................................................................................................

NOTE TO APPLICANTS: Please complete the above and forward to your Referee with a copy of the completed application.
### REFEREE’S REPORT (Cont.)

**Scientific merit of the project?**

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Very Good</th>
<th>Excellent</th>
</tr>
</thead>
</table>

**Research abilities of the investigators?**

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Very Good</th>
<th>Excellent</th>
</tr>
</thead>
</table>

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**Name (Block Letters):**  

**Title:**  

**Institution:**  

**Signature:**  

**Date:**
THE GARNETT PASSE AND RODNEY WILLIAMS MEMORIAL FOUNDATION

Conjoint Grant

REFEREE’S REPORT

Closing Date: 22 October 2014

IN CONFIDENCE

Application for an award by

of (institution)

Project Title

NOTE TO APPLICANTS: Please complete the above and forward to your Referee with a copy of the completed application.
SCIENTIFIC MERIT OF THE PROJECT?

<table>
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<tr>
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</table>

RESEARCH ABILITIES OF THE INVESTIGATORS?

<table>
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<tr>
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</table>

Name (Block Letters):  .................................................................

Title:  ............................................................................................

Institution:  ..................................................................................

Signature:  ................................................................. Date:  ............