**HONG KONG LUNG FOUNDATION**

**RESEARCH GRANT AWARD APPLICATION FORM**

**PART A SUMMARY OF THE RESEARCH PROPOSAL**

1. Project title :

2. Name(s) of Applicant(s) and Units involved :

Department/

Name Post Institution

Principal

Investigator :

(with title)

Are you a “Young Investigator”? Yes/No

Co-Investigator(s) :

(with title)

(A Co-Investigator with more than 2 years post-Fellowship experience is required for PI being “Young Investigators”

3. Grant requested :

Total cost of project :

|  |  |
| --- | --- |
| (a) Staff | HK$ |
| (b) Equipment | HK$ |
| (c) General Expenses/Publication Processing Fee | HK$ |
| Less: |  |
| Other research funds secured from other sources | HK$ |
|  |  |
| Net grant requested \* : | HK$ |

4. Abstract of protocol :

(A short summary amounting to less than 400 words, comprehensible to a non-specialist, should be given. This should state the aims of the protocol, key issues and problems to be addressed, possible outcome of the research project, and its relevance and significance to Hong Kong)

**PART B DETAILS OF RESEARCH PROPOSAL**

1. Background of research :

(Summary of related work already done and outline of previous approaches to the problem - (a) By others

(b) By your team

(Maximum 2 pages including key references)

2. Research plan and methodology : (Maximum 3 pages)

(please include key references)

3. Expected duration for entire project (in months)

Proposed starting date : Proposed completion date :

4. Estimated cost and resource implication of the whole project :

|  |  |  |
| --- | --- | --- |
|  | Year 1  HK$ | Total  HK$ |
| (a) Staff |  |  |
| Rank No. Salary per month |  |  |
| (b) Equipment  (please itemize and provide two  quotations for each item costing  over HK$50,000) |  |  |
| (c) General expenses/publication processing fee  (please itemize) |  |  |
|  |  |  |
| Total |  |  |

5. Other research funds secured which have been successfully obtained to reduce the total amount stated in Item 4 .

Source Amount

HK$

6. Allocation for grant requested : HK$

(Item 6 = Item 4 - Item 5)

(The amount shown here should be the same as shown

in Item 3 of Part A above)

7. Other research funds which are being/will be sought to reduce the amount of grant requested in Item 6. (If the funds under Item 7 are secured, the net amount of research grant requested in Item 3 of Part A may be reduced.)

Source Amount

HK$

8. Justifications for each category/item of the budget in Item 4 above:

(Outline of each item of request must be provided to support the request for funding)

9. Have funds previously been sought from any source for the same or similar project(s) ?

Yes No

If yes, please state Organization/Committee applied to :

Project Title (if different from Item 1 of Part A above)

Date of application :

Outcome :

10. If this proposal *is the same as or similar to one previously submitted*, what alterations or improvement has been made? Please itemize these changes and provide a copy of the original application protocol for comparison.

11. Are there similar or related projects in your institution(s) ?

Yes No

If yes, please give brief details (titles, brief nature of the projects, name of investigators and organizations involved.) (attach additional page(s) if applicable)

12. Results of previous HKLF funded projects (Attach additional page(s) summarizing the progress, key results and publications in respect of each projects if applicable; please show HKLF project reference number if applicable)

13. Curriculum vitae of applicant(s)

(Attach to the end of the application CVs giving personal particulars, qualifications, working and research experience, ten most representative/relevant publications, etc. Each CV should be limited to 2 pages. **Full list of publications need not be provided unless subsequently invited by the Committee**.)

14. Research ethics/safety approval

(a) For projects requiring approval in the following areas, please tick ‘√ ‘ in the appropriate box(es) to confirm whether the appropriate approval has been obtained : -

|  |  |  |
| --- | --- | --- |
|  | Approval required | Approval obtained |
|  |  |  |
| Human research ethics |  |  |
| Animal research ethics |  |  |
| Biological safety |  |  |
| Ionizing radiation safety |  |  |
| Non-ionizing radiation safety |  |  |
| Chemical safety |  |  |

(b) Approval required, if any, by other authorities and prospects of such approval :

(N.B. : The primary responsibility of seeking the relevant approval rests with the applicants. The institution is required to complete and sign Part C of this application form to certify whether the relevant approval has been given.)

15. I/We certify that I/we have completed this application form, with clear understanding of the terms and requirements stated in the current HKLF Research Grant Regulations and 1/We agree to follow them. The research is not funded in part or in total by any commercial or tobacco company(ies). The information given is to the best of my/our knowledge complete and accurate.

Name of Principal : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date :\_\_\_\_\_\_\_\_\_\_\_

Investigator

Name of : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date : \_\_\_\_\_\_\_\_\_\_\_

Co-investigator

Name of : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date : \_\_\_\_\_\_\_\_\_\_\_

Co-investigator

(Add more names if necessary)

PART C INSTITUTIONAL ENDORSEMENT

(To be completed by the appropriate administrative authority e.g. Chief of Service or

Head of Department)

1. I confirm that :

(a) the application has been evaluated and endorsed by the institution for submission to the Hong Kong Lung Foundation;

1. my Department or Institute will assist in creating a separate account to hold the research grant, if awarded, which will only be spent on the aforementioned expenditure incurred on the said project;

(c)the Principal Investigator (PI), , is a full-time staff member of my Department/Institute of Staff Grade \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ . The PI is also expected to be employed full time in my Department/Institute until the end of this project as stated in Part B (3);

(d)the institution understands that the Hong Kong Lung Foundation grant, if given, will be withdrawn if the project does not start or the PI leaves my Department/Institute within one year of the funding award. I agree that my Department/Institute will then forward the balance of unspent award to Hong Kong Lung Foundation.

Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(IN BLOCK LETTERS)

Designation : Chief of Service or

Head of Department

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PART D DECLARATION OF RESEARCH ETHICS/SAFETY

(To be completed by the appropriate administrative authority e.g. Chief of Service or

Head of Department)

(a) I have examined the research proposal and confirm that the approval of the appropriate authority(ies) has been/will be obtained in respect of the following :

(please tick ‘√‘ as appropriate)

Approval obtained Approval being sought

Human research ethics

# Animal research ethics

Biological safety

Ionizing radiation safety

Non-ionizing radiation safety

Chemical safety

Where such approval is required but not yet obtained, the institution will ensure that it will be obtained without delay, and forward this to the Hong Kong Lung Foundation by *31st Dec* each year.

(b) I have examined the research proposal and confirm that no approval is required in respect of research ethics/safety as stated in Section (a) above.

Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(in BLOCK letters please)

Designation : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_