

## FULL GRANT APPLICATION FORM PREVIEW ONLY - DO NOT SUBMIT

Please note that form logic is used, and not all question fields may be relevant to you.

### CRF Annual Grants 2026 - Stage 2 - Full Grant Application

#### SECTION 1: PROJECT DETAILS

Project title as per EOI (required)

*Copy/paste from Expression of Interest (EOI)*

Overview (required)

Please provide a 50 word overview of the project, write for a general audience.

Impact statement (required)

Limit: 50 words

Describe here the potential impact of your research project on children's health, education or welfare. Write for a general audience.

Aims (required)

**B** *I* U    

Limit: 300 words

*Copy/paste/elaborate on the EOI answer.*

*Aim to convey the relevance and basics of the design of the proposal to a general audience.*

Optional: upload PDF for supporting tables, graphs, images (Aims)

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .pdf

Hypothesis or Research Question (required)

**B** *I* U    

Limit: 200 words

*Copy/paste/elaborate on the EOI answer - or enter 'not applicable'*

*Write for a general audience, avoid jargon and acronyms.*




Optional: upload PDF for supporting tables, graphs, images (Hypothesis or Research Question)

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .pdf

Background (required)

**B** *I* U    

Copy/paste/elaborate on EOI answer.  
Write for a general audience, avoid jargon and acronyms.

**Optional: upload PDF for supporting tables, graphs, images (Background)**

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .pdf

**Research Plan** (required)

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Limit: 1600 words

Copy/paste/elaborate on EOI answer.  
Write for a general audience, avoid jargon and acronyms.

**Optional: upload PDF for supporting tables, graphs, images (Research Plan)**

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .pdf

**Related Research** (required)

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Limit: 350 words

Copy/paste/elaborate on EOI answer.  
Provide references (with comment on the referenced research, if considered helpful) to similar work being done in the field of the application by other researchers in Australia. The question is not related to research done (or to be done) by the applicant.

**Optional: upload PDF for supporting tables, graphs, images (Related Research)**

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .pdf

**References** (required)

**B** *I* U ☰ ☷ ” ☞

**Please use consistent referencing for all listed.** There is no word limit for this question.

**Ethics requirements****This project involves:** (required)

- ☐ research on human subjects
- ☐ research using animals
- ☐ recombinant DNA

☐ none of the above.

## SECTION 2: RESEARCH TEAM

**Chief Investigator** (required)

**ENTER:** Title, First name, Surname

There is one Chief Investigator on CRF grants. This person takes overall responsibility for the design, conduct and reporting of a study. All other named investigators will be Associate Investigators.

**Early Career Researcher (ECR)** (required)

- ☐ Yes - applying for ECR grant
- ☒ Yes - applying for full grant
- ☐ No

If you are an early career researcher (ECR), upload your Curriculum Vitae with this application.  
You are not precluded from applying for a full grant.

**Upload your CV** (required)

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .pdf

**Time commitment on the project for the Chief Investigator (CI)** (required)

**Will the CI be overseas /on leave for a significant period during the grant period?** (required)

- ☒ Yes
- ☐ No

**State length and dates of absence:** (required)

**Do you have Associate Investigators? (AIs)** (required)

- ☒ Yes
- ☐ No

A maximum of 10 Associate Investigators (AIs) can be named.

**AI 1 - Name** (required)

**ENTER:** Title Firstname Surname

**AI 1 - Email** (required)

**AI 1 - Position / Institution** (required)

**ENTER:** AI's position at Institution / Institution name

**Add 2nd Associate Investigator** (required)

- ☒ Yes
- ☐ No

AI 2 - Name (required)

ENTER: Title Firstname Surname

AI 2 - Email (required)

AI 2 - Position / Institution (required)

ENTER: AI's position at Institution / Institution name

Add 3rd Associate Investigator (required)

- ☐ Yes
- ☒ No

Technical and other staff

	A	B	C	D	E	F	G
1	Role (Research Student/RA/Tech/etc)	Title	First Name	Surname	Academic Qualifications	Institution	Time on this project (%)
2							
3							
4							
5							
6							
7							
8							
9							
10							

Please list technical and other staff that will be involved in the project. If not yet appointed, please list surname as TBC

Publications (required)

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .pdf

Follow link to Download Publications template (<https://www.crf.org.au/grant-application-templates/>)

SECTION 3: BUDGET





Are Basic Services and Equipment Available? (required)

- ☐ Yes
- ☐ No

Except for any special items requested, are the necessary basic services and equipment, such as an equipped laboratory, staffed workshop and secretarial assistance available?

Provide details of your institution's employment on-cost calculation (required)

**Justification of Budget** (required)

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Limit: 350 words

**Upload Budget calculation** (required)

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .pdf

Follow link to Download budget template (<https://www.crf.org.au/grant-application-templates/>)

**Budget total** (required)

AU\$  AUD

Enter the budget total for the project as a whole dollar value, without punctuation: e.g. 75000

**SECTION 4: OTHER FUNDING**

**Upload 'Other Funding' table** (required)

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .pdf

Follow link to Download Other Funding template (<https://www.crf.org.au/grant-application-templates/>)

**SECTION 5: NOMINATE REVIEWERS**

**CI Nominated Reviewer 1 - Name** (required)

Nominate two independent reviewers who could be approached by CRF to comment on the proposed project.  
Do not nominate close collaborators, or researchers with whom you have published in the last 5 years.

**CI Nominated Reviewer 1 - Email** (required)

**CI Nominated Reviewer 2 - Name** (required)

**CI Nominated Reviewer 2 - Email** (required)

**Is there anyone you prefer us not to contact?** (required)

- ☒ Yes
- ☐ No non-refer preference

You may nominate a non-referral preference; however, please note that for the request to be considered, **clear justification and substantive evidence must be provided.**

**Non-refer reviewer name** (required)

Non-refer reviewer email (required)

Provide clear justification and substantive evidence for consideration of non-refer request (required)

Minimum of one paragraph for CRF to consider non-refer request. If you prefer, you may email further details to [crf@crf.org.au](mailto:crf@crf.org.au)

SECTION 6: SUBMIT

Signatures (required)

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .pdf

**PLEASE NOTE: Submission of this Grant Application indicates acceptance of the Terms and Conditions of Funding as per the template available on the CRF website.**

*Follow link to download the funding agreement preview (<https://www.crf.org.au/grant-application-templates/>)*

*Follow link to download signatures template (<https://www.crf.org.au/grant-application-templates/>)*

Save Draft

Submit Form