

SECTION A: CHIEF INVESTIGATOR

Please note that the research project must be led from South Australia, and both the Chief Investigator and administering Institution must be located in South Australia.

The Chief Investigator is the person who takes overall responsibility for the design, conduct and reporting of a study.

Title *

Select...

First Name *

Surname *

Academic Qualifications *

Enter the official abbreviations (academic postnominals) of the degrees conferred, e.g. BSc.

Conferring institution *

Year conferred *

The year in which the qualification was officially conferred; this might not be the year of completion.

Early Career Researcher *

- ☐ Yes
☐ No

This category is available for:

1. Medical applicants who are undertaking a PhD or MD
2. Non-medical applicants who have honours, masters or are undertaking a PhD
3. Applicants with a PhD of no more than five years' duration
4. Applicants who have not been the Lead Chief Investigator of a significant peer reviewed grant application in the past for organisations such as NHMRC, ARC, CRF, Cancer Council etc.

Position title *

Enter the formal title of the position held by the CI at the administering institution.

Department *

Phone Number - preferred *



Include area code

Phone Number - alternative *



Include area code (same number can be entered in both fields)

Email *

This field is the Chief Investigator's email address.

EOI lodgement confirmation and EOI outcomes notification will be sent to the SUBMITTER'S e-mail address - please note in case the submitter is not the CI.

SECTION B: ASSOCIATE INVESTIGATOR/S

The Chief Investigator can include a maximum of ten Associate Investigators on the team.

Do you have any Associate Investigators? *



Yes



No

Associate Investigators *



PERSONNEL	Title	First Name	Surname	Academic Qualifications (Academic Postnominals)	Institution	Time on this project (%)
Chief Investigator						
Associate Investigator (1)						
Associate Investigator (2)						

Associate Investigator (3)				Back to Edit		
Associate Investigator (4)						
Associate Investigator (5)						
Associate Investigator (6)						
Associate Investigator (7)						
Associate Investigator (8)						
Associate Investigator (9)						
Associate Investigator (10)						

SECTION C: PROJECT

Project title *

The Project title should not exceed 200 characters (including spaces) and should accurately describe the nature of the project in language understandable to the general community.

Avoid using specialist characters and symbols because they may not transfer successfully to other computer systems.

Research category *

Discipline *

Significance *

Limit: 100 words

Briefly describe the potential significance of the project, and its relevance to the health and well-being of children, in non-technical terms. This summary may be used in future media releases, on the website and/or the Annual Report.

Which, if any, of the following CRF Research Priorities do you consider this research proposal addresses? *

- ☐ Improving fetal development including preventing pre-term birth

- ☐ Improving systems of care and education for children
- ☐ Supporting young minds and improving children's mental health
- ☐ Tackling chronic illness and disability
- ☐ Does not address a priority theme

More than one checkbox can be ticked, as relevant. Please note: it is not essential to address a particular research priority; all research proposals relevant to the health, education and/or welfare of children will be considered.

SUMMARY OF AIMS, HYPOTHESES, BRIEF RESEARCH PLAN AND BUDGET

The CRF Research Committee will determine the shortlist based on the information provided in the EOI. Ensure this information enables the Committee to determine how the proposal is relevant to **children**.

Additional space will be available in the Grant Application form if the EOI is shortlisted to proceed to the grant application stage.

AIMS: *

Limit: 150 words

HYPOTHESIS: *

Limit: 100 words

BRIEF RESEARCH PLAN: *

Limit: 500 words

Briefly describe how the research outcomes will improve health, education or welfare outcomes for children *

Limit: 200 words

RELATED RESEARCH: *

Limit: 350 words

Provide details of any similar peer-reviewed research being undertaken in this field by others. 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.

Project duration *

- ☐ 1 year
- ☐ 2 year

Budget estimate *

AU\$ AUD

Enter the estimated budget total for the project as a whole dollar value, without punctuation: e.g. 75000
Full budget details will be sought if the EOI is shortlisted to proceed to the grant application stage.

SECTION D: RECIPIENT

Select the Administering Institution from the drop-down list. If the Institution is not listed, select the option in the next question to obtain further instructions.

Administering institution *

Select...

My institution wasn't in the list. Register a new one? *

- ☒ Yes
- ☐ Not applicable

If a new Institution is to be added, please email the request to crf@crf.org.au
After registering the new institution, please return to this question and select the Institution from the dropdown list.

Instructions to add New Institution

1. If a new Institution is to be added, email the request to crf@crf.org.au (<mailto:crf@crf.org.au>)
2. You will need the Institution Name, ABN, business address, Research Secretariat contact details (one per organisation).
3. After registering the new Institution, return to this question and select the Institution from the dropdown list.

ABN *

Business Address *

Country

Select...

Address

Address Line 2 (optional)

City

State, Province, or Region

Zip or Postal Code

Research secretariat contact

One contact per organisation. Please confirm the correct details with your Administering Institution's research secretariat. This e-mail address will be used for pre-award correspondence.

EOI lodgement confirmation, and outcomes notification, will be sent to the SUBMITTER's e-mail address.

Title *

Select...

First name *

Surname *

Position title *

Phone Number - research secretariat *



Include area code

Email *

email@example.com

Institution where the work will be conducted *

- ☐ Work will be conducted at Administering Institution
☐ Other location


If the research project won't be primarily conducted at the administering institution, please name the host organisation.

SECTION E - PERSON AUTHORISING EXPRESSION OF INTEREST

The administering Institution's representative certifies that the project is appropriate to the facilities available and that the project would be carried out strictly in accordance with the agreement and research guidelines.

Title *

Select

First name *	<input type="text"/>
Surname *	<input type="text"/>
Position title *	<input type="text"/>
Institution *	<input type="text"/>
Phone Number - authoriser *	<input type="text"/>
 <input type="text"/>	
Include area code	
Email *	<input type="text"/>
	email@example.com
<input type="button" value="Save Draft"/>	<input type="button" value="Submit Form"/>

Template provided for your convenience.

Please access the link to Submittable from the CRF website.

PLEASE NOTE THIS IS NOT THE APPLICATION FORM