

### **Application Form**

### Medical Research Future Fund Researcher Exchange and Development within Industry Program (REDI)

Version July 2019

This document shows the questions included in the online application form for this grant opportunity. It will help you prepare your responses and the mandatory attachments you need before you apply online.

Do not use this document as your application form. You will need to submit an application using the online form once the grant opportunity is open to applications.

#### Contents

Medica	l Research Future Fund	1
Rese	earcher Exchange and Development within Industry Program (REDI)	1
Conten	ts	2
About t	he Medical Research Future Fund	5
	t the Researcher Exchange and Development within Industry Program (REDI)	5
Com	pleting this form	5
Discl	losure of personal and confidential information	6
Getti	ng help	6
Subn	nitting your application	6
A. Eli	gibility	7
A.1.	Eligible entities	7
A.2.	Additional eligibility criteria	7
B. Co	ntact details	9
B.1.	Details of primary contact	9
B.2.	Contact's relationship to applicant	9
B.3.	How did you hear about the grant opportunity?	10
C. /	Applicant information	11
C.1.	Joint applications	11
C.2.	Type of applicant	11
C.3.	Applicant details	11
C.4.	Trustee and trust details	12
C.5.	ANZSIC details	13
C.6.	Address details	13
C.7.	Website address	13
C.8.	Project site address	14

	Site	address 1	14
	Site	address 2	14
	Site	e address 3	14
	C.9.	Latest financial year figures	15
	C.10.	Ultimate holding company	16
	C.11.	Project partner details	17
	C.12.	About your organisation	18
D.	F	Project details and funding	18
	D.1.	Project title and description	18
	D.2.	Detailed project description and key activities	19
	D.3.	Project outcomes	19
	D.4.	Project milestones	19
	Mile	estone 1	19
	Mile	estone 2	20
	Mile	estone 3	20
	D.5.	Project duration	21
	D.6.	Project plan	21
	D.7.	Project budget	21
	Confli	cts of interest	22
Ε.	Mer	it criteria	24
	E.1.	Merit criterion one (40 points)	24
	E.2.	Merit criterion two (30 points)	25
	E.3.	Merit criterion three (30 points)	25
F.	Sup	pporting documents	26
	F.1.	Attachment 01 – incorporated trustees	
	F.2.	Attachment 02 – letters of support from project partners	26
	F3	Attachment 03 – project plan including timetable and budget	27

F.4.	Attachment 04 – documents to justify project costs	27
F.5.	Attachment 05 – evidence to support source of funding	27
G.	Applicant declaration	28
G.1.	Privacy and confidentiality provisions	28
G.2.	Applicant declaration	28

# About the Medical Research Future Fund

The Medical Research Future Fund (the program) will run over four years from 2019-20 to 2022-2023. The program was announced as part of the 2014-15 Budget.

The objective of the program is:

 to strategically fund research and address national priorities in a cohesive and coordinated way.

The Australian Government has announced a total of \$20 billion for the establishment of the Fund.

# About the Researcher Exchange and Development within Industry Program (REDI) grant opportunity

This grant opportunity was announced as part of the Medical Research Future Fund.

The objectives of the grant opportunity are:

 to provide researchers with a diverse range of experiences and exposure to entrepreneurism with the aim of strengthening Australia's success with translation and commercialisation to identify innovative ways to prevent, diagnose and treat disease.

This grant opportunity has \$32 million available over four years.

#### Completing this form

You should read the <u>grant opportunity guidelines</u> (guidelines) before filling out this application.

This application form contains the following:

- Part A Eligibility
- Part B Contact details
- Part C Applicant information
- Part D Project details and funding
- Part E Merit criteria
- Part F Supporting documentation
- Part G Applicant declaration

### Disclosure of personal and confidential information

The Commonwealth's use and disclosure of both your personal and confidential information (provided in this application or otherwise) is set out in the grant opportunity guidelines. Ensure that you have read this document and understand the information contained therein. For further information regarding the Department of Industry, Innovation and Science's (the department's) obligations in accordance with the Privacy Act, refer to the department's Privacy Policy<sup>1</sup>.

#### Getting help

If you require assistance completing this application form or are unable to use the online form you can contact us on 13 28 46 or at <a href="mailto:business.gov.au">business.gov.au</a>. Our website and staff can help you with forms, finding information and services and allow you to provide feedback.

You should also ensure you have read the guidelines and sample grant agreement/s before seeking help. View these documents at business.gov.au.

#### Submitting your application

Applications may be submitted at any time up until 5.00pm AEST on 19 September 2019. We cannot accept late applications.

<sup>&</sup>lt;sup>1</sup> https://industry.gov.au/Pages/PrivacyPolicy.aspx

### A. Eligibility

#### A.1. Eligible entities

This section will help you determine whether you are an entity eligible for the grant opportunity.

You are required to answer all questions in this section.		
Does your organisation have an Australian Business Number (ABN)?	☐ yes	☐ no
Is your organisation incorporated in Australia?	☐ yes	☐ no
Is your organisation one of the following bodies?		
medical research institute		
university		
corporate Commonwealth entity		
corporation (including businesses and not for profits)		
If 'no' is selected, the applicant is not eligible and an error message should appear		
A.2. Additional eligibility criteria  This section will help you determine whether you comply with additional for the grant opportunity.  You are required to answer all questions in this section.	al eligibility crit	teria
Do you have evidence from your board (or chief executive officer or equivalent if there is no board) that there is support for the project, that you can complete the project and meet the costs if the project is not covered by grant funding?	yes	no
Do you have a project plan?	☐ yes ☐	no
Do you have a detailed project budget?	☐ yes ☐	no

Researcher Exchange and Development within Industry Program (REDI) application form industry.gov.au

opportunity.

If you answered 'yes' to all of the questions above you are eligible to apply for this grant

For further information regarding eligibility guidelines.	requirements re	fer to the grant oppor	tunity

#### B. Contact details

#### B.1. Details of primary contact

Person authorised to act on behalf of the applicant.

The fields below are mandatory except for title.

Provide deta	s of the primary contact.
Title	
Given nam	
Family nam	<b>)</b>
Position titl	
Phone number	
Mobile number	
Email addr	SS
Provide the	ostal address of the primary contact
Address	
Suburb/ to	า
State/ territ	ry
Postcode	
Country	Australia
B.2.	Contact's relationship to applicant
Is the appli	ant the primary contact's employer?
table.	ed ' <b>yes</b> ' go the next question. If you answered ' <b>no</b> ' complete the following
vv nat is the	relationship of the

primary contact to the applicant?

Name of primary contact's employer
Australian Business Number
(ABN) of primary contact's
employer
Provide a contact for the applicant organisation
Title
Given name
Family name
Position title
Phone number
Mobile
number
Email address

# B.3. How did you hear about the grant opportunity?

--- Please select --If Other, please specify:

### C. Applicant information

#### C.1. Joint applications

Joint applications are acceptable, provided you have a lead applicant who is the main driver of the project and is eligible to apply.

Is this a joint application?	☐ yes ☐ no
If you answered ' <b>yes</b> ' to this question the lead applicant must counsure whether your application should be a joint application countries.gov.au	
C.2. Type of applicant	
In this section you must indicate your entity type.	
All entities must have an ABN.	
Select your entity type	
company incorporated in Australia	
company limited by guarantee	
incorporated trustee on behalf of a trust	
incorporated association	
□ co-operative	
incorporated not for profit	
publicly funded research organisation (PFRO)	
C.3. Applicant details	
If you are applying as a trustee on behalf of a trust leave this que next question.	estion blank and go to the
Australian Business Number (ABN)	
Australian Company Number (ACN)  If applicable	
Entity name	
The entity name refers to the legal/ registered	

name that appears on official business

documents. The entity name may be different from the business name.	
Business/ trading name	
Your organisation may have one or more registered business names. Provide any relevant business or trading names here.	
GST registered?	☐ yes ☐ no
C.4. Trustee and trust of	details
Australian Business Number (ABN) of the trustee	
(if different to trust, otherwise leave blank)	
Australian Company Number (ACN) of the trustee	
Entity name of the trustee	
The entity name refers to the legal/ registered	
name that appears on official business	
documents. The entity name may be different from the business name.	
Australian Business Number (ABN) of the trust	
Entity name of the trust	
Business/ trading name	
Business/ trading name	
Business/ trading name  Your organisation may have one or more	

You must provide trust documents showing the relationship of the incorporated trustee to the trust.

#### C.5. ANZSIC details

What is your organisation's main revenue earning activity under the Australian and New Zealand Standard Industrial Classification (ANZSIC)?

The ANZSIC codes and titles are available from the <u>Australian Bureau of Statistics (ABS) website</u>.

Phone 13 28 46 if you require assistance.

#### C.6. Address details

Address		
Suburb/ town		
State/ territory		
Postcode		
Provide your <b>organi</b>	sation's postal address.	
Same as you	ur street address, go to next section.	
Different to		
I DITTERENT TO V	our street address, provide details below.	
Dillerent to y	am and a management of the second second	
Address		_
Address	то по то	
Address Suburb/ town	то по	

Provide your organisation's website address.

C.8.	Project site address
Will your proj address?	ject's activities occur solely at the above listed head office
If you answere table.	ed ' <b>yes</b> ' go to the next question. If you answered ' <b>no</b> ' complete the following
A project site	address must be a street address not a postal address.
Site add	ress 1 – where the majority of project activities will occur.
Address	
Suburb/ town	۱
State/ territor	у
Postcode	
Country	Australia
Site add	ress 2
Suburb/ towr	
State/ territor	
Postcode	<del>,</del>
Country	Australia
Site add	ress 3
Address	
Suburb/ towr	)
State/ territor	у
Postcode	
Country	Australia

#### C.9. Latest financial year figures

Has your organisation existed for a complete financial year?	☐ yes ☐ no
If you answered ' <b>yes</b> ', enter the latest completed financial year, then complete the table below.  Example entry 2013-14	
If you answered ' <b>no</b> ', enter the number of months your organisation has existed, then complete the table below.	months

We collect the following data from all applicants across all grant programs. We use this data to better understand your organisation and to help us develop better policies and programs.

All amounts in the table below must show a whole dollar value e.g. \$1 million should be presented as \$1,000,000. The turnover value must be that of the entity that is making the grant application (the 'applicant'), regardless of whether the entity belongs to a consolidated group for tax purposes.

These fields are mandatory and entering \$0 is acceptable if applicable for your organisation. If they clearly do not apply to your organisation you may select 'not applicable'.

Recent trading performance	Check box if the indicator is not applicable to your organisation	Figures for the latest full financial year
Sales revenue (turnover)  Total revenue from the sale of goods and services, as reported in your organisation's Business Activity Statements (BAS).	□ n/a	\$
Export revenue  Total revenue from export sales, as reported in your organisation's BAS.	□ n/a	\$
R&D expenditure  Expenditure on research and development, i.e. creative work undertaken on a systematic basis in order to increase the stock of knowledge, including knowledge of man, culture and society,	□ n/a	\$

Recent trading performance	Check box if the indicator is not applicable to your organisation	Figures for the latest full financial year
and the use of this stock of knowledge to devise new applications.		
Taxable income  Taxable income or loss as reported in your organisation's income tax return form.	□ n/a	\$
Employees, including working proprietors and salaried directors (headcount)  Number of individuals who are entitled to paid leave (sick and holiday), or generate income from managing your organisation.	□ n/a	
Independent contractors (headcount)  Number of individuals engaged by your organisation under a commercial contract (rather than an employment contract) to provide employee-like services on site.	□ n/a	
C.10. Ultimate holding co	ompany	
Does your company have an ultimate holding comp	pany?	☐ yes ☐ no
If you answered ' <b>yes</b> ' complete the following table. If	you answered ' <b>no</b> ' (	go to next question.
Ultimate holding company ABN (if applicable)		
Entity name of ultimate holding company		
The entity name refers to the legal/ registered name that appears on official business		

documents. The entity name may be different from the business name.

Country of registration of ultimate holding company

#### C.11. Project partner details

If this is a joint application, provide details of your project partners in the following table. If you have more than 10 partners, please email <a href="REDI@industry.gov.au">REDI@industry.gov.au</a> with the letters of support and a description of the nature of their contribution.

If your application is successful, we may ask you for your project partners' financial details.

Please describe the type/s of contributions the project partner will provide to the project. Examples include cash, in-kind.

No	Australian Business Number	Australian Company Number	Organisation name	Entity type	Nature of contribution
1					
2					
3					
4					
5					
6					
7					

You must attach a letter of support from each of the project partners involved in the project.

The guidelines provide guidance on what is required in the letter of support.

#### C.12. About your organisation

Please describe your organisation's current core business:

750 character limit (including spaces)

#### D. Project details and funding

#### D.1. Project title and description

If your application is successful, some project details will be published on the Department of Health website/<u>GrantConnect</u>. Published project details include:

- name of the applicant
- a project title
- a brief project description and its intended outcomes
- amount of funding awarded.

Provide a project title.

70 character limit (including spaces)

Provide a brief project description for publication.

Ensure your project description focuses on your project's key activities and outcomes. Explain what it is you are going to do and how it will benefit your organisation.

Example project description: Transition Pty Ltd is an injection moulding company that manufactures plastic products and now intends to extend its business into the healthcare sector by manufacturing sterile plastic equipment for medical use.

750 character limit (including spaces)

### D.2. Detailed project description and key activities

Provide a detailed description of your project including the project scope and key activities.
This information will not be published.
2000 character limit (including spaces)

#### D.3. Project outcomes

Provide a summary of the expected project outcomes.

This information will not be published.

1350 character limit (including spaces)

#### D.4. Project milestones

Provide details on the project milestones including the key activities occurring at each milestone. Your descriptions should be outcomes focussed.

You can have a maximum of 8 milestones and there must be a milestone due for completion roughly every 6 months.

The start date of milestone 1 is the expected project start date. The end date of your last milestone activity will be the project end date.

#### Milestone 1

Milestone title			

80 character limit (including spaces)	
Milestone description	
600 character limit (including spaces)	
Milestone start date	Milestone end date
Milestone 2	
Milestone title	
80 character limit (including spaces)	
Milestone description	
600 character limit (including spaces)	
Milestone start date	Milestone end date
Milestone 3	
Milestone title	
80 character limit (including spaces)	
Milestone description	

600 character limit (including spaces)

Milestone start date

Milestone end date

#### D.5. Project duration

The project start and end date have been prefilled from the date of your first and last milestone.

Projects must be completed by 30 June 2022.

Project start date	Project end date	

#### D.6. Project plan

You must attach a project plan of the project activities you will conduct including a timetable and budget for all significant activities.

#### D.7. Project budget

Provide the total eligible project costs over the life of the project.

Amounts must be GST inclusive, less any GST credits that you can claim.

We only provide grant funding based on eligible expenditure. Refer to the guidelines for guidance on eligible expenditure.

Eligible expenditure item	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23	Total
Direct labour costs	\$	\$	\$	\$	\$

Eligible expenditure item	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23	Total
Contract expenditure	\$	\$	\$	\$	\$
Domestic travel	\$	\$	\$	\$	\$
Staff training	\$	\$	\$	\$	\$
Other	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$

Please list the other eligible items and their costs.

200 character limit (including spaces)

You must attach a detailed project budget with your application to help justify your estimated project costs. We may request additional supporting documentation if your application is successful.

You must also attach the following:

Evidence from your board (or chief executive officer or equivalent if there is no board)
that the project is supported, that you can complete the project and meet the costs of
the project not covered by grant funding. You must use the board approval template
provided at business.gov.au.

#### Conflicts of interest

Do you have any perceived or existing conflicts of interest to declare?	☐ yes	☐ no

Refer to the grant opportunity guidelines for further information on your conflict of interest responsibilities.

If yes, describe the perceived or existing conflict/s of interest and how you anticipate managing them.

750 character limit (including spaces)

#### E. Merit criteria

To be competitive you will need to score highly against each merit criterion. Your application will be assessed against the indicators listed beneath each merit criterion. The merit criteria are weighted as indicated by the points.

You are not required to provide responses up to the maximum character limit. The amount of detail and supporting evidence you provide should be commensurate with the project size, complexity and grant amount requested. You should define, quantify and provide evidence to support your answers.

#### E.1. Merit criterion one (40 points)

The extent that your project enhances researchers' skills to commercialise and translate new or existing health research

You should demonstrate this by identifying:

- your service offering and how you will enhance researchers skills and experience in commercialising and translating new or existing research to benefit end users
- the reach of your services, your connections with the sector and how researchers, academia and industry will discover, access and participate in your services, including the number of researchers that will access mentoring, exchange programs and industry placements
- how your project will leverage and develop sustainable collaborations in medical research disciplines that need stronger industry partnerships. Include the rationale for selecting each discipline.

5000 character limit (inclu	ding spaces)	

#### E.2. Merit criterion two (30 points)

#### Your capacity, capability and resources to deliver the project

You should demonstrate this by identifying:

- your access to personnel with the right skills and experience
- your access, or future access to, any infrastructure, capital equipment, technology and intellectual property
- a sound project plan to manage and monitor the project and risks, including how you are going to measure success.

5000 character limit (including spaces)

#### E.3. Merit criterion three (30 points)

#### Impact of grant funding

You should demonstrate this by identifying:

- the total investment the grant will leverage including cash and in-kind contributions
- your ability to fund your share of project costs not covered by the grant
- your project budget, including a breakdown of administrative costs as a percentage of the eligible project costs
- the impact of the payments you will make to researchers and registered training organisations to arrange fellowships, mentoring, training and exchange programs for researchers.

5000 character limit (including spaces)

#### F. Supporting documents

You should note any supporting documentation that you attach to the application here. You should only attach documents you have referred to in your application.

- The following restrictions apply to attachments:
- total size of all attachments and this application form should not exceed 20MB
- file size of each attachment cannot exceed 2MB
- only files with the following file type extension can be uploaded (.pdf, .rdtf, .doc, .docx, .xls, .xlsx)

For assistance with any technical issues experienced while completing this application form or attaching documents phone 13 28 46. Our staff can help you.

#### F.1. Attachment 01 – incorporated trustees

This is only for applicants where an incorporated trustee is applying on behalf of a trust, but is mandatory for those applicants.

Part of application form	Type of attachments	Attached?
Part C4 - trustee and trust details	Trust documents showing the relationship of the incorporated trustee to the trust.	☐ yes

# F.2. Attachment 02 – letters of support from project partners

This is only for joint applications, but is mandatory for those applications.

Part of application form	Type of attachments	Attached?
Part C11 –project partner details	For joint applications, letters of support from project partners as outlined in the guidelines	□ yes

## F.3. Attachment 03 – project plan including timetable and budget

Part of application form	Type of attachments	Attached?
Part D7 – project plan	A plan of the project activities you will conduct including a timetable and budget for all significant activities.	□ yes

### F.4. Attachment 04 – documents to justify project costs

Part of application form	Type of attachments	Attached?
Part D8 – Project budget	Documents to help justify your estimated project costs.	□ yes

# F.5. Attachment 05 – evidence to support source of funding

Part of application form	Type of attachments	Attached?
Part D7 – Your contribution	Evidence to support the sources of funding you have outlined.	□ yes

#### G. Applicant declaration

#### G.1. Privacy and confidentiality provisions

I acknowledge that this is an Australian Government program and that the department will use the information I provide in accordance with the following

- Australian Government Public Data Policy Statement
- Commonwealth Grants Rules and Guidelines
- grant opportunity guidelines
- applicable Australian laws.

Accordingly, I understand that the department may share my personal information provided in this application within this department and other government agencies:

- for purposes directly related to administering the program, including governance, research and the distribution of funds to successful applicants and
- to facilitate research, assessment, monitoring and analysis of other programs and activities

unless otherwise prohibited by law.

I understand that where I am successful in obtaining a grant, the financial information that I provide for the purposes of payment will be accessible to departmental staff to enable payments to be made through the department's accounts payable software system.

I understand that information that is deemed 'confidential' in accordance with the guidelines may also be shared for a relevant Commonwealth purpose.

The department will publish information on individual grants in the public domain, including on the department's website and the <u>GrantConnect</u> website unless otherwise prohibited by law.

#### G.2. Applicant declaration

I declare that I have read and understood the grant opportunity guidelines, including the privacy, confidentiality and disclosure provisions.

I declare that the proposed project outlined in this application and any associated expenditure has been endorsed by the applicant's Board or person with authority to commit the applicant to this project.

I declare that the applicant will comply with, and require that its subcontractors and independent contractors comply with, all applicable laws.

I declare that the information contained in this application together with any statement provided is, to the best of my knowledge, accurate, complete and not misleading and that I understand that giving of false or misleading information is a serious offence under the *Criminal Code 1995* (Cth).

I acknowledge that I may be requested to provide further clarification or documentation to verify the information supplied in this form and that the department may, during the application process, consult with other government agencies, including state and territory government agencies, about the applicant's claims and may also engage external technical or financial advisors to advise on information provided in the application.

I understand that I am responsible for ensuring that I have met relevant state or territory legislation obligations related to working with children, and that any person that has direct, unsupervised contact with children as part of a project under this [program/grant opportunity], has undertaken and passed, a working with children check, if required under relevant state or territory legislation. I am also responsible for assessing the suitability of people I engage in this project to ensure children are kept safe.

I acknowledge that if the department is satisfied that any statement made in an application is incorrect, incomplete, false or misleading the department may, at its absolute discretion, take appropriate action. I note such action may include excluding an application from further consideration; withdrawing an offer of funding; using the information contained in the application for a fraud investigation that would be consistent with the Australian Government's Investigations Standard and Commonwealth Fraud Control Framework and for management purposes and/or terminating any grant agreement between the Commonwealth and the recipient including recovering funds already paid.

I agree to participate in the periodic evaluation of the services undertaken by the department.

I declare that I am authorised to complete this form and acknowledge that by including my name in this application I am deemed to have signed this application.

I approve the information in this application being communicated to the department in electronic form.

	By checking this box I agree to all of the above declarations and confirm all of the above statements to be true
Signature	
Name of	signatory

Email address of signatory

Date

Signature

