

Canine Research Foundation Pty Ltd (ATF)
Canine Research Foundation
APPLICATION FORM FOR FUNDING IN 2027



Completed applications must be emailed to Dr Alicia Fuller canineresearchfoundation@gmail.com by the due date

Full Name of Project Leader	
Name of Faculty/Institute	
The CRF is a Public Charitable Trust and research funded is to be conducted at Australian universities	

CERTIFICATION - APPLICANT

I, the Project Leader, certify that:

- To the best of my knowledge all details on this application form are true and complete
- I am not undertaking a Higher Degree by Research
- I am an academic member of staff at an Australian University
- The project is focused on improving canine health
- I have gained approval for this grant application from my Head of School / Department
- I have obtained the agreement of all participants to submit this application
- If successful:
 - all funds for this project will only be spent for the purpose for which they are provided.
 - I understand that funding will not be provided until appropriate ethical/biosafety clearance has been obtained (where necessary)
 - I will provide a mid-year progress report, including a list of any associated publications or conference presentations
 - Within six months of the end of the period for which the project was funded, I will provide a final report covering the project and a summary for prospective publishing in journals of Member Bodies of the Australian National Kennel Council and other canine journals
 - Any publications resulting from the research supported by the Foundation will acknowledge support from the Canine Research Foundation.

Signature of Applicant

Name and Title (please print)

Date

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CERTIFICATION - HEAD OF SCHOOL / DEPARTMENT

I, the Head of School / Head of Department and/or other authorised person agree that facilities are available for the completion of this project and that I am agreeable to the location of this project under my jurisdiction.

**Signature of Head of School /
Department**

Name and Title (please print)

Date

PART A—ADMINISTRATIVE SUMMARY

A1 PROJECT TITLE

Provide a short descriptive title of no more than 10 words

A2 PROJECT LEADER DETAILS

Name:

Email address:

Postal address of University Research Office:

Email address of University Research Office or contact:

A3 TOTAL FUNDING REQUESTED

\$

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A4 PROJECT SUMMARY

In no more than 250 words of plain language, summarise aims, significance and expected outcomes. Use clear, plain English understandable to a layperson and avoid the use of technical terms unique to the area of study

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A5 KEYWORDS

Select up to 4 keywords to describe the proposed research. They should be of the kind normally required for submitting an article to a major refereed journal

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A6 PARTICIPANT SUMMARY (add more rows if necessary)

#	First name and Surname	Title	Organisation	Role
1				
2				
3				

A7 OTHER APPLICATIONS

List any other CRF applications in which any of the Project members (above) are named Project Leaders for the current funding round

Participant Name	Project Title

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A8 PREVIOUS SUCCESSFUL APPLICATIONS TO THE CRF

List previously successful applications to the CRF

Year funding Received	Project Title	Amount Received

A9 ETHICS AND SAFETY CLEARANCES

If ethical clearance is required, clearance must be obtained from the relevant University Ethics Committee. This may include Animal Ethics Committee approval where procedures are conducted on animals, and Institutional Biosafety Committee approval where genetically modified organisms are used

- If your project already has clearance, please insert the reference number
- If you have not yet obtained clearance, insert TBA (to be advised).
- If your project does not require clearance, insert N/A.

Indicate if the project will involve:	Yes / No	Reference Number (if known)
The use of animals		
Genetic manipulation or other biosafety or biosecurity issues		

Note: If a project involves any of the above and the application is successful, no funds will be released until the necessary clearance has been obtained and emailed to canineresearchfoundation@gmail.com

A10 PROPOSED DATES

Commencement Date	
Completion Date	



PART B – PROJECT DESCRIPTION

Maximum 6 pages. Use the headings below (*delete the instructions in italics before finalising the application*).

B1 PROJECT TITLE

Use the same title as listed at A1

B2 GLOSSARY OF TERMS (SUMMARY OF COMMONLY USED ABBREVIATIONS)

Please include all acronyms/abbreviations used

B3 AIMS AND BACKGROUND

Include the rationale for the project, theoretical background, expected impact of the work

B4 SIGNIFICANCE AND INNOVATION

Describe how the research is significant and whether the research addresses an important problem in canine health. Describe how the anticipated outcomes advance the knowledge base of the discipline and why the project aims and concepts are novel and innovative. Detail any new methodologies or technologies that will be developed. Where applicable describe how this project relates to previously approved projects. State the relevance of this project to canine health. Include any preliminary data.

B5 APPROACH AND ANALYSIS

Describe the approach to the project and the methodology to be used. How does the methodology answer the Aims? Outline data analysis methods if appropriate. Include number of samples including controls that will be used in the project. For prospective studies, please provide the expected number of cases to be collected. Has a statistician or biometrician been consulted in the design of the project?

Applicants must provide a Project Activity Schedule (template provided below) which will act as a work plan for the life of the project. The Schedule must include key project milestones and their cost over the 12 month period (use ascending date order from top to bottom).

Applications without this completed table will be considered non-compliant and will not be forwarded for review.

If the application is successful, you will be required to report against these milestones.

Include the table below.

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Project Activity Schedule (example)

Milestone (number & type)	Milestone Completion Date	Cost Description	CRF Funding required
Milestone 1 Obtain Ethics clearance	31/1/2027	N/A	\$0
Milestone 2 Experiments for Aim 1 completed	31/3/2027	-Equipment & Consumables	\$1,000
Milestone 3 Assays to be completed	31/7/2027	-Consumables	\$2,000
Milestone 4 Task B	30/11/2027	-Consumables	\$1,685
		TOTAL (Highlight this row and total cell and press F9 to update value)	\$4,685.00

Milestone (number & type)	Milestone Completion Date	Cost Description	CRF Funding required
Milestone 1			
Milestone 2			
Milestone 3			
Milestone 4			
		TOTAL (Highlight this row and total cell and press F9 to update value)	

Add rows if necessary

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B6 LIST OF RELEVANT REFERENCES

Provide a list of relevant publications – highlight surnames in bold if the authors are involved in this project.

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PART C—PROJECT COST

C1 BUDGET DETAILS

- List all items for which support is being sought
- Only one year of support may be requested
- Costs must be quoted exclusive of GST
- Enter as whole dollars

Add additional sections as required

YEAR 2027

Source of funds	Requested from CRF
DIRECT COSTS	
Equipment	
Total Equipment	
Animals and capital costs	
Total for Animals and capital costs	
Laboratory items to support project	
Total Laboratory items	
Other (please specify)	
Total Other	
TOTAL COSTS	

C2 – OTHER FUNDING SOURCES

Please list details of any funds provided or being sought from other sources for this project.

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PART D – BUDGET JUSTIFICATION

D1 JUSTIFICATION OF THE BUDGET

Two pages maximum (delete the instructions in italics before finalising the application).

Provide a case for each requested item and demonstrate why each is necessary. Use the headings listed in the budget table as applicable ie delete headings if not required.

D1.1 Equipment

D1.2 Animals and capital costs

D1.3 Laboratory items to support project

D1.4 Other (please specify)

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PART E – PERSONNEL DETAILS
PROJECT LEADER AND INVESTIGATOR(S)

Complete for each **project leader and each investigator** listed in Sections A2 and A6 ie *Copy Part E in its entirety for each project leader and investigator/s and collate in the order in which they appear at A2 and A6*

Include all team members including students enrolled in Honours or Higher Degree programs that will be involved with the project (If applicable)

Role	Project Leader
Time Commitment – in days per month (Minimum 3 days per month) This is mandatory.	

E1 PERSONAL DETAILS			
Family name		Given name	
Title			
Email			

E2 ORGANISATION DETAILS	
Department/school/other	
Faculty / Institute	
Address	

E3 QUALIFICATIONS

E3.1 Highest academic qualification

Type (eg PhD)			
Discipline/Field			
Institution			
Country			
Year awarded			



E4 ROLE IN THE PROJECT

E5 LIST TOP 10 PUBLICATIONS BY THE RESEARCH TEAM RELEVANT TO THIS PROJECT

This only needs to be completed once and by the Project Leader