NZIMLS RESEARCH GRANT

Prerequisites and Application Form

Prerequisites for Applicants

1. The applicant must have been a Member of the New Zealand Institute of Medical Laboratory Science (Inc) (NZIMLS) for a minimum period of two (2) years.
2. The applicant must be a current financial member of the NZIMLS and must remain so for the duration of the research project.
3. The applicant must be currently employed in a New Zealand medical laboratory or university.
4. The Application Form must be fully completed.
5. In the event of any delays to the prescribed research timetable, the successful applicant must notify the Executive Office immediately upon identification of such delays. Failure to do so may result in the NZIMLS cancelling the research grant and requiring the return of all grant funds.
6. At the end of the research period, any unspent monies from the NZIMLS funded research grant must be returned to the NZIMLS.
7. The applicant must supply a final written report, to be in hands of the NZIMLS Journal Editor within three (3) months of completion of project for consideration of publication.
8. The decision of the NZIMLS Council on the awarding of scholarships is final and no correspondence will be entered into.
9. The application must comply with the "Guide for Applicants".

Please ensure you complete this form in full. Incomplete applications will not be considered.

Principal Investigator:	
Name	
Laboratory	
Co-Investigator (if any):	
Name	
Department	

Project for which funding is sought (15 words maximum):	
Summary of funding requested (up to $7,000.00 in total): *Transfer values from Section Budget 5.a*	
• Salaries	$
• Travel	$
• Materials and Running Costs	$
• Other	$
Total	**$**

1.	**Description of project:** *(250 words maximum describing aims, background, and research questions)*

2.	**Proposed methodology**: *(250 words maximum describing methods, procedural steps, contribution of each participant; include timeline)*

3.	**Proposed Research Timeline:** *Briefly provide a timeline for the proposed research using the following headings where applicable.*
Recruitment	

Laboratory Analysis	
Data Analysis	
Report & Manuscript Preparation	

4.	**Expected outputs:** *250 words maximum describing research outputs and their significance and originality and publication.*

5.	**Curriculum Vitae:** *Principal Investigator to complete the NZIMLS curriculum vitae form and attach to this application.*

6.a	**Budget:** *Please provide full details of proposed expenditure in each category below, and transfer totals to summary table on cover page.*

Salaries for Researchers	
Description	*Amount*

Travel, Accommodation and other related costs (including travel insurance)	
Description	*Amount*

Materials and Running Costs	
Description	*Amount*

Other	
Description	*Amount*

6.b	**Budget Justification:** *Explain why requested items are essential to the project, with attention to any costs outside the general categories of assistance (see 'Guidelines for Applicants'). Be as specific and detailed as possible within the space constraints (1-page maximum).*

6.c	**Other Financial Support:** *Indicate if further financial support is required for the project. If required, advise if this has been sought, the amount and if it has been granted.*

7.a	**Ethical Approval:** *Applicants should note that monies cannot be uplifted until the required Ethical Approval has been granted.*	
Does this research require ethical approval?	Yes ☐	No ☐
If yes, has approval been sought?	Yes ☐	No ☐
If yes, has approval been granted?	Yes ☐	No ☐
7.b	**Research Consultation with Māori:**	
Does this research require consultation with Māori?	Yes ☐	No ☐
If yes, has consultation been sought?	Yes ☐	No ☐
If yes, has consultation taken place?	Yes ☐	No ☐

8.	Signatories
Applicant (Principal Investigator):	
I confirm that all information included in this application is true and correct. If successful, I undertake to submit a brief report (250 words max) to the NZIMLS Executive Office and Editor of the NZIMLS Journal within three (3) months of completion of this project. I also confirm that I am a named principal investigator on this NZIMLS application only.	
Name:	
NZIMLS Membership Number:	
Signature:	
Date:	
Head of Department: *(required for individual applications only)*	
I confirm that this project can be managed within this staff member's workload. I support this application:	
Name	
Signature	
Date	
HoD Additional Comments:	