Spinnaker - Barry Marshall Travel Award 2024 - v1.0
Form Preview

Applicant Information

* indicates a required field

Before you begin

Before proceeding with this application, please ensure you have read and understood the latest version of the Guidelines for this round, including **all eligibility and application requirements**.

Privacy Notice

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1.1 Applicant details

1.1.1 In which capacity will you undertake the proposed conference activity? *
- ○ As a current Higher Degree by Research student
- ○ As a clinical researcher
- ○ As a research scientist

1.1.2 Applicant name *

Title | First Name | Last Name

1.1.3 Applicant phone number *

Must be an Australian phone number.

1.1.4 Applicant email address (Students: please provide your university email address) *

Must be an email address.

1.1.5 Have you previously received a Barry Marshall Travel Award? *
- ○ Yes
- ○ No

1.1.6 In what year was that award held? *

1.2 Student details

1.2.1 What research degree are you enrolled in? *
○ Masters
○ PhD

1.2.2 At which university are you enrolled in that program of study? *

1.2.3 Name of the host Faculty/School/Department at that university *

1.2.4 Start date of your enrolment in that program *

1.2.5 Estimated end date of your enrolment *

1.2.6 Are you studying full-time or part-time? *
○ Full-time
○ Part-time

1.2.7 At which campus of SMHS or affiliated entity in South Metropolitan Perth are you primarily undertaking your research project? *

1.3 Principal Supervisor details

1.3.1 Principal Supervisor's name *
Title   First Name   Last Name

1.3.2 Principal Supervisor's position *

1.3.3 Principal Supervisor's primary affiliation *

1.3.4 Principal Supervisor's phone number *

Must be an Australian phone number.

1.3.5 Principal Supervisor's email address *

Must be an email address.

1.4 Researcher details

1.4.1 Your employing organisation through which conference participation has been arranged *

[   ]

1.4.2 Your current position title *

[   ]

1.4.3 Please select all other affiliation(s) you have (DO NOT reselect your primary) *

☐ Curtin University
☐ Edith Cowan University
☐ Murdoch University
☐ University of Notre Dame Australia
☐ University of Western Australia

☐ East Metropolitan Health Service
☐ North Metropolitan Health Service
☐ WA Country Health Service
☐ PathWest
☐ Other: [   ]

☐ South Metropolitan Health Service
☐ No other affiliation

You can select more than 1 choice

1.4.4 Do you currently hold a Higher Degree by Research (either a Masters by Research or a PhD) in line with Australian Qualifications Framework Levels 9 or 10? *

○ Yes ○ No

For AQF levels, see www.aqf.edu.au/framework/aqf-levels

1.4.5 When was your HDR conferred?

Month of HDR conferral	Year of HDR conferral
Choose from the available options	Enter year in format YYYY

For the purposes of this scheme, "Early-Mid Career" is considered as up to 10 years post HDR conferral (where held), or an equivalent amount of research experience, allowing for career disruptions in line with the NHMRC Relative to Opportunity policy available from: https://www.nhmrc.gov.au/about-us/policies-and-priorities#download.

Please note that further justification for claims of HDR equivalence and/or career disruption(s) may be requested during assessment.

1.4.6 Do you believe you meet the definition provided above for an Early-Mid Career Researcher? *

○ Yes ○ No

1.5 Summary of your Research Project

1.5.1 In lay language, provide a brief summary of your research project and its significance. *

Word count:

Must be no more than 100 words.

1.5.2 Explain how your research is being undertaken at, or is connected to, SMHS. *

Word count:

Must be no more than 100 words.

Activity Details

* indicates a required field

2.1 Reason for funding request

2.1.1 For what type of conference activity are you seeking support? Please tick one. *

○ Travel to participate in a national conference in person
○ Travel to participate in an international conference in person

2.1.2 Attach the official approval to travel from your organisation below

Depending on your institution and role, this may be a 'Pre-Trip Approval (PTA)', 'Notification to Travel Form', internal memo from the CEO or other written approval for travel obtained through your employing/enrolling institution's travel approval process.

You **must** have this approval for your application to be considered complete.

*

Attach a file:

2.1.3 Start date of travel (i.e. when do you begin your journey) *

Must be a date.

2.1.4 End date of travel (i.e. when do you complete your journey) *

Must be a date.

2.2 Conference details

2.2.1 Name of the conference *

2.2.2 Conference location, including country. (Indicate 'virtual' if attended remotely) *

2.2.3 Please provide the URL to the conference website or program, showing the dates of the event *

2.2.4 Start date of your attendance at the conference *

Must be a date.

2.2.5 End date of your attendance at the conference *

Must be a date.

2.2.6 Which active participation role(s) will you undertake at the conference? *
☐ Oral presentation
☐ Poster presentation
☐ Chairing a panel/session
At least 1 choice must be selected.

2.2.7 Upload written confirmation from the event organisers that you have been granted the role(s) indicated above. *
Attach a file:

2.2.8 Upload a copy of the abstract(s) submitted to the conference organiser *
Attach a file:

2.2.9 Has this research previously been presented at a conference? *
○ Yes   ○ No

2.2.10 Provide details below of all previous presentations of this research, including the conference name, date and location as well as the nature of that presentation (e.g. poster, oral presentation). *

Word count:
Must be no more than 100 words.

2.3 Activity & Impact

2.3.1 Justify i) the merit/standing of this conference in your field of study, and ii) outline any opportunities for networking/collaboration activities you will undertake in addition to conference participation. *

Word count:
Must be no more than 200 words.

2.3.2 Outline the anticipated outcomes and benefits for i) your future research program as a result of participating in the conference, and ii) your broader career development. *

Word count:
Must be no more than 200 words.

2.3.3 Explain how conference participation will enhance the relevance and potential benefit of your research program for i) SMHS community/patients and ii) for Western Australia more broadly. *

Word count:
Must be no more than 200 words.

Budget and Financial Support

Please note: Should the request be successful, funds will be provided to the cost centre at the employing/enrolling institution through which conference registration and/or travel was arranged and as indicated on the official travel approval form (or similar). Funds will not be provided to private accounts and can't be claimed directly from THRF Group.

3.1 Conference participation costs

List below **all eligible expenditures** arising from your conference participation. The amounts requested should align with the information provided on the official travel approval (if applicable) and the invoices/receipts provided below.

Grant funds are intended to fund conference registration, economy flights, and accommodation for the official conference dates but are **not** intended to fund per diems, visa, transfers, meals, entertainment or memberships.

Applicants must have followed relevant University/Health Service travel policy guidelines when making bookings.

3.1.1 Type of expenditure	3.1.2 Cost (AUD)	3.1.3 Invoice, quote or receipt for item	3.1.4 Description and cost calculation /

			explanation (see hint text below)
	MUST be provided in Australian dollars.	HINT: Please highlight or otherwise annotate the file if needed to indicate the specific items in question.	HINT: Please provide as much information as you can, including anything needed to understand the attachments and how you arrived at the cost given at 3.1.2. For example, cost per night, dates of stay, currency conversion or explanation of split/ shared costs. This narrative is particularly useful if the attached files are not in English.
	$		

3.2 All other funding contributed towards this activity

Please list below **all other funds** that have been awarded or allocated for use towards the eligible expenses incurred for conference participation indicated at 3.1, including from funds from internal accounts and any funds you may be contributing personally.

3.2.1 Source	3.2.2 Value of contribution (AUD)

3.3 Budget summary

The summary below is automatically calculated from the information provided above.

The amount at *3.3.3 Funding gap* **must not** exceed the maximum funding available from this scheme ($5000).

3.3.1 Total cost of activity

$

This number/amount is calculated.
Sum of all funds entered in 3.1

3.3.2 Other funds contributed

$

This number/amount is calculated.
Sum of all funds entered in 3.2

3.3.3 Funding gap

$

This number/amount is calculated.
Total cost of activity (3.3.1) minus other funds contributed (3.3.2).

WARNING

The funding gap at 3.3.3 exceeds $5,000, which is the maximum funding available from this scheme.

Please ensure all other funds used towards the costs of this activity have been included at 3.2.

Applicant Declaration

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4.1 Declaration

In submitting this form:

- I certify that to the best of my knowledge that all information and responses in this application are true.
- I understand the eligibility requirements of this competitive grant round as described in the Guidelines, and acknowledge my application may be ruled ineligible if it breaches any such requirements.
- I have obtained the consent of all other named individuals to be included in this application.
- I agree to Spinnaker/THRF Group collecting, using and disclosing personal information provided in this application in accordance with its Privacy Policy and have notified the other individuals in the application of that Privacy Policy.

4.1.1 Applicant's full name *

4.1.2 Date of application submission *

Must be a date.