**SMF RESEARCH GRANT PROGRAMME**

**APPLICATION FORM INSTRUCTIONS & CHECKLIST**

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| --- |
| **Administrative Instructions**1. The applicant must be the Host Institution (“HI”) hosting the Principal Investigator (“PI”) of project. Joint applications by two qualifying HIs are also allowed. In such a case, each HI must appoint a PI for the project and both HIs must sign off on a single joint application.
2. Every section and field must be completed. Please indicate “NA” where a particular section or field is not applicable. Any blue text serve as samples.
3. For tables, do add additional rows as required. For write-ups, do add additional sheets as required.
4. All financial figures should be presented in Singapore dollars (S$).
5. Applications must be submitted as a softcopy in the following manner:
6. **Softcopy Submission**

 The softcopy submission must comprise the following:i. Editable version in Microsoft Word format (without signatures); &ii. Scanned & signed version in colour and in Adobe PDF format.The documents are to be sent to Temasek Foundation Innovates CLG Limited at admin.smfgrant@temasekfoundation.org.sg.1. Through the act of submitting this application, the applicant acknowledges that the information may be used or disclosed by Temasek Foundation Innovates CLG Limited for evaluation, reference and reporting purposes. All information submitted will be treated in confidence.
 |

**CHECKLIST**

 🞏 Section 2 – Profiles of Principal Investigator(s), Co-Investigator(s) and Key Collaborator(s) Attached

 🞏 Section 4 & 5 – KPIs & Milestones Indicated

 🞏 Section 6 – Budget Projections Completed in Accordance with Funding Guidelines

 🞏 Section 8 – Ethics Approval Process Understood (specifically, if the project is approved, ethics approval **must** be obtained by the first claim request. Hence, the applicant should understand the ethics approval process of his or her respective institution prior to submission.)

 🞏 Section 10 – Peer Reviewers Identified

 🞏 Section 11 – Application Form Signed (by both HIs, if joint application)

 🞏 Editable Softcopy Emailed to “admin.smfgrant@temasekfoundation.org.sg”

**SMF RESEARCH GRANT PROGRAMME**

**APPLICATION FORM**

**SECTION 1 – PROJECT INFORMATION**

|  |
| --- |
| **BASIC PROJECT INFORMATION** |
| **Full Project Title***Instructions: Please limit to 300 characters.* |  |
| **Research Area** | ◻ **Start Well** ◻ **Learn Well** ◻ **Live Well** ◻ **Leave Well**  |
| **Applicant Host Institution(s)** |  |

|  |
| --- |
| **PROJECT INFORMATION FOR PUBLIC COMMUNICATIONS***Instructions: The purpose of this section is to allow persons unfamiliar with the subject matter to understand the project (e.g. for use in our website). Hence, please keep the language simple.* |
| **Simple Project Title***Instructions: Please limit to 15 words.* |  |
| **Simple Project Description***Instructions: Please limit to 100 words.* |  |
| **Key Words***Instructions: At least 3 words. Maximum 6 words.* |  |

|  |
| --- |
| **FUNDING DETAILS** |
| **Proposed Budget ($)** |  |
| **Proposed Duration**  |  |

**SECTION 2 – PROJECT TEAM**

**Project Team**

*Instructions: Please include the PI or joint PIs (first rows), co-investigators, partners (e.g. an interdisciplinary collaborator or a social enterprise partner or a commercial partner) and other support staff (e.g. research fellows, research assistants, PhD students). Please note that for joint applications, each HI must designate one project PI.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Member Name, &** **Project Role** | **Title or Position, Department, &****Institution or Organization** | **% of Time Spent on Project****(& Number of Other Concurrent Projects)** | **Description of Expected Contribution to the Project Deliverables**  |
| Ms Jane LeePrincipal Investigator | Senior Lecturer, Dept of Physics,University of Science & Tech | 50%(1 other concurrent project) |   |
|  |  |  |  |
|  |  |  |  |

**Mentor**

*Instructions: Early career researchers relatively new in their research journey may propose the appointment of a mentor to guide them in their research journey under this project and may propose some cost items related to the mentorship process. Please include information on the mentor separately in the table below.*

|  |  |  |
| --- | --- | --- |
| **Mentor Name** | **Title or Position, Department, &****Institution or Organization** | **Area of Expertise** |
| Mr John DoeMentor | Associate ProfessorNational University of Singapore |  |

**Profiles of Principal Investigator(s), Mentor & Key Collaborators**

*Instructions: Please provide a write-up on the PI(s), mentor (if applicable) and key collaborators (such as any co-investigators, interdisciplinary collaborators or social enterprise partners or commercial partners), if applicable. The write-up should cover the information below, where applicable, and should not exceed 2 pages per person.*

|  |  |
| --- | --- |
| **Name** |  |
| **Office Mailing Address** |  |
| **Email Address** |  |
| **Phone Number** |  |
| **Fax Number** |  |
| *Instructions:**a) Current Position (Please provide full details, e.g. joint appointments, percentage of time spent in Singapore every year, if applicable.)**b) Academic Qualifications (Please indicate institution’s name and year degree awarded.)**c) Research Interests**d) Publications in the Past 5 Years (Please include only publications of direct relevance to project, stating impact factors, where possible)**e) Patents held (Please include patents both related & unrelated to the proposed project.)**f) Recent Scientific Awards**g) Current and Previous Funding Support from Other Sources or Grants (Please also include the proposals pending approval.)**h) Research Outcomes from Other Grants (e.g. publications, patents, awards)**i) Account of Preliminary Studies by the PI/Co-Investigator (if any) Pertinent to the Application (Please include any other information that will help to establish the experience and competence of the applicant with relation to the proposed project.)* |

**SECTION 3 – PROJECT DESCRIPTION**

*Instructions: Please provide a detailed write-up covering the following areas.*

**Abstract or Summary**

|  |
| --- |
| *Instructions: Please concisely describe in 300 words or less, the specific aims, hypotheses, methodology and approach of the research proposal, including its importance to the research community and its impact on the intended user segment. This abstract must be self-contained so that it can serve as a succinct and accurate description of the research proposal. Please use non-technical language.* |

**Specific Aims**

|  |
| --- |
| *Instructions: State concisely and realistically what the project intends to accomplish and/or what hypothesis is to be tested.* |

**Methods**

|  |
| --- |
| *Instructions: Describe the following in detail:**a) Experimental design and the procedure,* *b) Any new methodology and its advantage over existing methodologies,**c) The potential difficulties and limitations of the proposed procedures and alternative approaches to achieve the aims,**d) Any procedures, situations or materials that may be hazardous to personnel and the precautions to be exercised,**e) Statistical justification and the means by which data will be analyzed and interpreted.* |

**SECTION 4 – IMPACT, OUTCOMES & PERFORMANCE INDICATORS**

**Significance & Potential of Short-Term & Long-Term Impact & Implications**

|  |
| --- |
| *Instructions: Briefly sketch the background of the research proposed, critically evaluate existing knowledge/practices and specifically identify the gaps which the project intends to fill. State the importance of the research described by relating the specific aims to both short term (duration of project) and possible long-term impact & implications.* |

**Outcomes**

|  |
| --- |
| *Instructions: Describe how your research will contribute to the following (where applicable), and the outcomes you hope to achieve.* *a) Solving the Problem Identified**b) Developing New Knowledge**c) Developing Scientific Applications**d) Providing Tangible Improvements in the Area of Study being Researched**e) Benefitting Singapore and our Society*  |

**Performance Indicators**

|  |
| --- |
| **Qualitative Indicators** |
| **Establishing Partnerships for Pilots & Trials** |
| *Instructions: If your project will benefit from having a partner at some point, please describe or identify a potential interdisciplinary collaborator or a social enterprise partner or a commercial partner for your project. Please also describe how you envision such a partner would bring your project closer to pilots, trials, prototype development or field deployment.*  |

|  |  |
| --- | --- |
| **Quantitative Indicators***Instructions: Please indicate the final expected targets. State ‘NA’ where indicator is not applicable. It is important to note that it is* ***not*** *expected that high values (implying strong impact) be set for all indicators. Instead the intent of this section is to understand the difference in impact across the various indicators.* | **Target Value** |
| **Training R&D Manpower for Industry** |  |
| Research Fellows or Research Engineers |  |
| Research Associates or Research Assistants (RAs) |  |
| PhD Students |  |
| Master’s Students |  |
| Bachelor’s Students |  |
| **Developing Long-Term R&D Capability** |  |
| Joint Programmes or Projects with International Universities or Research Organizations |  |
| Joint Programmes or Projects with Local Universities or Research Organizations |  |
| Invention Disclosures |  |
| Patents Provisionally Applied for or Filed |  |
| Papers Published a Peer-Reviewed Journal |  |
| Other Publications (such as book or magazine) |  |
| Presentations at International Conferences |  |
| National-Level Research Awards |  |
| International-Level Research Awards |  |

|  |
| --- |
| **Additional Indicators***Instructions: If you would like to propose any additional indicators not found in the sections above, please do so in this section. These indicators may be either qualitative or quantitative.* |
| Additional Indicator 1 | Target |
| Additional Indicator 2 | Target |

**SECTION 5 – MILESTONES**

*Instructions: Please fill the table with the proposed milestones for the project. Do note that the progress of the project will be taken into consideration before the disbursements of funds.*

|  |  |  |
| --- | --- | --- |
| **#** | **Milestone Description****(Key Outputs and Outcomes for completion)** | **Target Duration** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |
| 7 |  |  |
| 8 |  |  |

**SECTION 6 – BUDGET**

**Manpower**

*Instructions: Please budget for all the manpower required for the project including part-time personnel and those to be shared with other projects. Please use one line for each project team member. State whether they are existing personnel in your institution or new staff to be recruited. State how much of their time is committed to this project.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Existing or New***(pls tick)* | **Team Member***(pls indicate HI if a joint application)* | **%age Time Allocated to this Project** | **Cost Per Staff Per Year** | **Total Cost** |
| **Year 1** | **Year 2**  | **Year 3**  |
| ◻ Existing◻ New | Research Assistant | % | $36,000 | $36,000 | $36,000 | **$108,000** |
| ◻ Existing◻ New | Research Assistant | % | $30,000 | $30,000 | $30,000 | **$90,000** |
| ◻ Existing◻ New |  | % |  |  |  |  |
| ◻ Existing◻ New |  | % |  |  |  |  |
|  |  | **Grand Total** | $66,000 | $66,000 | $66,000 | **$198,000** |

|  |
| --- |
| *Instructions: Please provide justification for the above manpower.* |

**Equipment**

*Instructions: Please budget for all scientific equipment you need to purchase to carry out the project. Please indicate sharing of equipment with other projects, if any.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Item***(indicate HI if a joint application)* | **%age Time Allocated to this Project** | **Number****Needed** | **Unit Cost** | **Total Cost** |
| Filtration System | % | 4 | $10,000 | **$40,000** |
|  | % |  |  |  |
|  | % |  |  |  |
|  | % |  |  |  |
|  |  |  | **Grand Total** | **$40,000** |

|  |
| --- |
| *Instructions: Please provide justification for the above equipment.* |

**Operating Expenses**

*Instructions: This category covers other expenses directly related to the project such as consumables, laboratory manuals, literature search, maintenance of equipment etc. Some examples are provide in the table below.*

|  |  |  |
| --- | --- | --- |
| **Category***(indicate amount under each HI if a joint application)* | **Cost Per Year** | **Total Cost** |
| **Year 1** | **Year 2**  | **Year 3**  |
| Materials & Consumables*e.g. research consumables (media, antibodies, etc)* |  |  |  |  |
| Training |  |  |  |  |
| Couriere.g. *transport of samples* |  |  |  |  |
| Payments to Subjects or Participants |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |
| --- |
| *Instructions: Please provide justification for each category of expenses above.* |

**SECTION 7 – INFORMATION ON PREVIOUS & ONGOING FUNDING**

**Previous Applications for SMF Grants**

*Instructions: Please list all the previous applications for the SMF grant, whether they are completed, ongoing, or unsuccessful. Please indicate “NA” if this is the first time you are applying for the SMF grant.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Project** | **Status** | **Approved Funding ($)** | **Balance Amount ($)** | **Grant Duration** | **Grant End Date** |
| Sample | Completed/Ongoing/Unsuccessful | $1,000,000 | $432,800 | 2 Years | 31 Dec 2030 |
|  |  |  |  |  |  |

**Projects with Ongoing Non-SMF Grants**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Project** | **Funding Agency** | **Approved Funding ($)** | **Balance Amount ($)** | **Grant Duration** | **Grant End Date** |
| Sample | NRF | $1,000,000 | $432,800 | 2 Years | 31 Dec 2030 |
|  |  |  |  |  |  |

**Projects Currently Under Evaluation for Non-SMF Grants**

*Instructions: Please list all the grants with similar proposals that you are currently applying for, in the capacity of the PI, co-investigator or collaborator, which are pending outcomes.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Project** | **Funding Agency** | **Funding Applied for ($)** | **Grant Duration** | **Application ID** |
|  |  |  |  |  |
|  |  |  |  |  |

**SECTION 8 – ETHICAL CONSIDERATIONS (IF APPLICABLE)**

*Instructions: Please note that ethics approval must be obtained prior to the first fund disbursement if the project involves any of the following. Please attach a copy of the ethics approval with the first reimbursement claim.*

|  |  |
| --- | --- |
| **Human Subject** | ◻ Yes ◻ No |
| **Use of Human or Animal Tissues or Cells from Primary Donors (i.e. subjects or volunteers recruited for project)** | ◻ Yes, Human ◻ No◻ Yes, Animal |
| **Use of Commercially Available Human or Animal Tissues or Cells** | ◻ Yes, Human ◻ No◻ Yes, Animal |
| **Animal Experimentation** | ◻ Yes ◻ No |
| **Requirement for Containment** | ◻ Yes ◻ No |
| **Multi-Centre Project(s) or Trial(s)***Instructions: If yes, please list all participating institutions & centers.* | ◻ Yes ◻ NoInstitution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Ethics Approval Attached** | ◻ Yes ◻ No |

**SECTION 9 – CONFLICT OF INTEREST**

*Instructions: Please provide the names and contact information of individuals who might have conflict of interests with your current research proposal.*

|  |  |  |
| --- | --- | --- |
| **Name****Title or Position****Institution or Organization** | **Details of Conflict of Interest** | **Email Address****Phone Number** |
| Mr John DoeHead of ResearchSingapore University |  | johndoe@sg-uni.edu.sg9876-5432 |

**SECTION 10 – RECOMMENDED EXTERNAL REVIEWERS**

*Instructions: Please provide the names and contact information of at least 3 individuals who have the subject matter expertise to review your research proposal.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Name****Title or Position****Institution or Organization** | **Relationship with Applicant** | **Area of Expertise** | **Email Address****Phone Number** |
| Mr John DoeHead of ResearchSingapore University |  |  | johndoe@sg-uni.edu.sg9876-5432 |
|  |  |  |  |
|  |  |  |  |

**SECTION 11 – DECLARATION AND SIGNATURES**

**For Principal Investigator(s), Co-Investigator(s) and Key Collaborator(s)**

In preparing this Grant Application, the Principal Investigator(s), the Co-Investigator(s) and the Key Collaborator(s):

* Declare that all submitted information is accurate and true;
* Undertake to submit supporting documents for the ethics approval obtained from the relevant Institutional Review Board (IRB) and Animal Ethics Committee for studies involving human subjects or human tissues or cells, and animal subjects or animal tissues or cells respectively, where applicable, before the first reimbursement request;
* Undertake not to accept funding from other agencies for the same or a substantially similar project;
* Undertake that the requested equipment or resources are not funded by another agency or research proposal; and
* Declare that a reasonable effort have been made in to access available equipment & resources within the host institution(s) or elsewhere in Singapore.

**Principal Investigator Principal Investigator**

 *(if joint application)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: Name:

Title: Title:

First Host Institution: Second Host Institution:

Date: Date:

**Mentor Co-Investigator / Key Collaborator**

*(if applicable)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: Name:

Title: Title:

Institution: Institution:

Date: Date:

**Co-Investigator / Key Collaborator Co-Investigator / Key Collaborator**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: Name:

Title: Title:

Institution: Institution:

Date: Date:

**For Supervisor(s) & Applicant Host Institution(s)**

In submitting this Grant Application, the Applicant Host Institution(s) and the Principal Investigator(s)’ Supervisor(s) (or higher authority) endorses the external reviewers as set out in Section 10 above and undertakes to ensure that the obligations as set out in Section 1 of the accompanying Terms & Conditions will be complied with, summarized here as follows:

* To conduct the proposed project in the Host Institution(s);
* To independently salary the Principal Investigator(s) & Co-Investigator(s) for the entire period of the grant;
* To provide adequate resources (e.g. lab space) to the project team for the entire grant period;
* To ensure the grant will only be used for the proposed project;
* To ensure no duplicate funding or financing is to be received for the proposed project or a substantially similar project;
* To properly and promptly submit all interim and final progress reports and to make presentations or stage field demonstrations as required;
* To comply with all instructions and directives from Temasek Foundation Innovates CLG Limited.
* To seek Temasek Foundation Innovates CLG Limited’s approval for any changes to the proposed project;
* To promptly submit accurate, complete and properly verified & certified information for claims, reports, budgets, ethics approvals, declarations of other funding sources and so forth;
* To adhere to the requirements and constraints on the types of reimbursable expenses;
* To ensure that the proposed project adheres to all laws on personal data protection; and
* To ensure that the proposed project adheres to all laws on human and ethical issues; and
* To ensure that the management of the budget of the proposed project complies strictly with the governance policies (e.g. no double funding, no excessive purchase of equipment) of the Host Institution(s).

**Supervisor / HOD / Dean of Faculty Director of Research /**

 **Institutional Representative**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: Name:

Title: Title:

Date: Date:

for and on behalf of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ for and on behalf of \_\_\_\_\_\_\_\_\_\_\_\_\_

*Second Host Institution (if joint application):*

**Supervisor / HOD / Dean of Faculty Director of Research /**

 **Institutional Representative**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: Name:

Title: Title:

Date: Date:

for and on behalf of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ for and on behalf of \_\_\_\_\_\_\_\_\_\_\_\_\_\_