**NHMRC Research Translation Centre Accreditation**

**Application requirements**

## **INTENTION TO SUBMIT**

Please register your intent to apply for accreditation by emailing AdvancedCentres@nhmrc.gov.au by **Friday, 29 October 2021**.

## **CLOSING DATE**

Applications must be submitted by email to AdvancedCentres@nhmrc.gov.au by
**11:59 pm (AEDT), Friday, 21 January 2022**.

## **FORMAT**

* + All written material must be in at least 11 point font. Footnotes should be avoided and not be used to provide claims against the assessment criteria. If used, they are to be in 9 point font.
	+ All documentation must be submitted in PDF format.
	+ Electronic signatures may be used.
	+ Submissions must not contain any multimedia or video files.
	+ The method of referencing must include the following minimum information: *Surname, Initials [all authors], Year, Title, Journal Title, Volume, Page(s), DOI [if assigned], and (if relevant) web link.* Web-links can only be used as part of referencing.

## **HOW TO SUBMIT AN APPLICATION**

Two (2) electronic files should be emailed to NHMRC at advancedcentres@nhmrc.gov.au in PDF format:

* 1. A completed *Application Form* that directly addresses the information requested in the *Call for Submission for Accreditation* *(2021)* within the specified format and page limits.
	2. A letter(s) of support from the relevant state or territory health department(s).

NHMRC will acknowledge receipt of your submission by email.

**APPLICATION FORM**

# Applicant details

|  |  |
| --- | --- |
| **Name of submitting collaboration** |  |

## ***Privacy and consent***

NHMRC, as an agency under the *Privacy Act 1988* (Cth), is required to notify you about our collection, use and disclosure of your personal information. We do so by referring you to the NHMRC Privacy Policy (<https://www.nhmrc.gov.au/privacy>). Please ensure that you have carefully read and understood the Privacy Policy prior to completing the application. If you have not understood the Privacy Policy or require further clarification, please contact the NHMRC Privacy Contact Officer via email (nhmrc.privacy@nhmrc.gov.au) or letter (NHMRC, GPO Box 1421, Canberra, ACT, 2601).

Your personal information may be disclosed to universities, private medical research bodies, Australian Commonwealth, state/territory or local government agencies for the purposes of establishing the Research Translation Centre Assessment Panel(s).

NHMRC may use the expertise of some assessors who reside overseas. While we take every effort to protect your personal information, assessors outside Australia are bound by their own country’s laws and consequently, we cannot provide assurance that your information will be handled in accordance with the same standards as required by the Privacy Act 1988 or that you would have similar remedies should your personal information be released in breach of local privacy laws.

If you do not provide consent for information to be sent overseas, this may affect the assessment of your application and may mean it cannot be progressed.

|  |  |
| --- | --- |
| I have read the NHMRC Privacy Policy | [ ]  Yes [ ]  No  |
| I consent for NHMRC to send personal information contained in this application, overseas for the purposes of assessment of this application.NB. This may include, if relevant, your previous applications for accreditation and previous feedback/outcomes from these applications. | [ ]  Yes [ ]  No |

## ***Certification***

By submitting this application the applicantprovides the assurance that:

* All required information has been provided and is complete, current and correct.
* All of the assessment criteria and other application requirements have been addressed.
* All personnel or people named in the application have provided written agreement to be named and to the use of their personal information as described in the *NHMRC Privacy Policy,* including for international review purposes.
* That the application may be used to inform any evaluation of the Research Translation Centre Initiative that NHMRC may undertake in the future.

## ***Partners***

List the partner organisations that comprise the collaboration.
Note, if there are also associate or affiliate partners, please differentiate between partner type.

As described in section 5 of the *Call for Submissions for Accreditation (2021)*, please identify duplicate partners and provide a rationale to explain how the roles of these partners are complementary and do not conflict or dilute the efforts across multiple NHMRC accredited centres.

**(Maximum 1 A4 page)**

## ***Key contacts***

Please provide details of the persons to be contacted regarding the information provided in this application form.

*Preferred contact*

|  |  |
| --- | --- |
| **Title** |  |
| **First name** |  |
| **Last name** |  |
| **Position** |  |
| **Organisation** |  |
| **Phone number** |  |
| **Mobile number** |  |
| **Email address** |  |
| **Copy to (cc email address)** |  |

*Alternative contact*

|  |  |
| --- | --- |
| **Title** |  |
| **First name** |  |
| **Last name** |  |
| **Position** |  |
| **Organisation** |  |
| **Phone number** |  |
| **Mobile number** |  |
| **Email address** |  |
| **Copy to (cc email address)**  |  |

## ***Type of accreditation***

Indicate the type of accreditation that is being sought:

|  |  |
| --- | --- |
| [ ]  | Research Translation Centre  |
| [ ]  | Research Translation Centre (Regional, Rural and Remote) |

## ***Population***

Indicate the geographical region(s) and populations the work of the collaboration covers in Australia, explaining how it aligns with the type of accreditation you are seeking. **(Maximum 250 words)**

## ***Submission history***

Has this collaboration applied for NHMRC accreditation previously?

|  |  |
| --- | --- |
| [ ]  | Yes  |
|  | Indicate which Call(s) for accreditation below: |
|  | [ ]  2018 Call | Name of submitting collaboration:  |
|  |  | [ ]  Accredited [ ]  Not accredited |
|  | [ ]  2016 Call | Name of submitting collaboration:  |
|  |  | [ ]  Accredited [ ]  Not accredited |
|  | [ ]  2014 Call | Name of submitting collaboration:  |
|  | [ ]  Accredited [ ]  Not accredited |
| Has the partnership changed since the last application?[ ]  Yes 🡪Briefly state the nature of the change **(Maximum 2 sentences)**: [ ]  No |
| [ ]  | No  |

# Summary of Submission

Provide a brief summary of the submission **(Maximum 2 A4 pages)**.

[Applicant response]

# Response to Assessment Criteria

Applicants must address the assessment criteria for the type of accreditation being sought within the stated page limits.

**CRITERION 1 (Maximum 5 A4 pages)**

[Applicant response]

**CRITERION 2 (Maximum 5 A4 pages)**

[Applicant response]

**CRITERION 3 (Maximum 5 A4 pages)**

[Applicant response]

**CRITERION 4 (Maximum 5 A4 pages)**

[Applicant response]

**CRITERION 5 (Maximum 3 A4 pages)**

[Applicant response]

# Partner Certification

Provide evidence that all partners in the collaboration agree with the contents of the application by listing partners, name and signature of its representative.

[Applicant response]

# References

The method of referencing must include the following minimum information: Surname, Initials [all authors], Year, Title, Journal Title, Volume, Page(s), DOI [if assigned], and web link [where relevant]. Web-links can only be used as part of this referencing.