

2024 Equipment Grant Application

Form Preview

TPCH FOUNDATION RESEARCH EQUIPMENT GRANT APPLICATION

* indicates a required field

Please ensure you read the [Grant Guidelines](#) before completing your submission. If you have any queries please contact the Foundation's Research Manager (megan.grace@tpchfoundation.org.au).

Eligibility

To be eligible for consideration, the requested equipment must be located at TPCH, or an associated community-based service affiliated with TPCH. The equipment must remain onsite, unless otherwise agreed to.

The item being purchased must be a piece of equipment that supports research at TPCH, and fit the definition of a "non human resource".

This includes:

- Specialised IT equipment
- Software for specific implementation of research
- Additional items for research and support e.g. specialist smaller equipment

and specifically excludes:

- Consumables
- Personal laptops
- General Queensland Health or University computers

Prior to Application

Applicants must obtain endorsement from their Business Manager and administering institute (e.g. TPCH or University) **prior to submission**. This includes, but is not limited to, confirmation that the equipment is needed, that there is space to store the equipment, and that the administering institute will take responsibility for the purchase, maintenance and servicing of the equipment.

Applicant Details

Applicant *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Email *

Office Phone Number *

Mobile *

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Professional association with TPC*H *

Academic Qualifications *

INSTITUTIONAL DETAILS AND ENDORSEMENT

* indicates a required field

Where will the equipment be located? *

Please be specific e.g. building, ward, room

Administering Institution *

Who will purchase, own and maintain the asset? E.g. TPC*H, University, Research Group

Have you obtained endorsement from the administering institution and your Business Manager or appropriate delegate? *

- Yes
 No

This includes but is not limited to confirmation that the equipment is needed, that there is space to store the equipment, and that the administering institute will take responsibility for the purchase, maintenance and servicing of the equipment

Will any additional stakeholder engagement be required? *

- Yes
 No

E.g. BEMS (building, engineering and maintenance services), BTS (biomedical technology services), Infection Control, IT Services

If stakeholder engagement is needed, please describe what support is required

Must consider any potential additional costs involved and indicate whether these are included in the current request for funding

Please attach evidence of Institutional and Manager/Delegate endorsement of this application *

Attach a file:

E.g. email confirmation, letter of support, or other evidence

EQUIPMENT DETAILS

* indicates a required field

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What is the primary priority area that your research addresses? *

- Heart
- Lung
- Mental Health
- Ageing

Please indicate if your research addresses any other Foundation priority areas

- Heart
- Lung
- Mental Health
- Ageing

Equipment description *

Name or description of equipment being requested.

Website for the equipment *

Must be a URL.

Is the Equipment: *

- New - doesn't currently exist
- Replacing old equipment
- Adding to equipment of a similar type

If applicable, please justify why replacement or duplicate equipment is required

What does the equipment do? *

Must be no more than 200 words.

How is this equipment relevant to the research at TPCH? *

Please include what impact or value the equipment will add.

Who will use the equipment and for what current and future projects? Please include whether the projects are currently funded. *

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Who will use the equipment, for what purpose/projects and for what duration of time? Include details on whether multiple groups will make use of the equipment, and if there is any relevant inter-team or inter-departmental collaboration.

EQUIPMENT BUDGET

* indicates a required field

Specific Equipment Details

Please list each component of the equipment and the cost in Australian dollars. The amount should be **GST exclusive**.

Equipment item	Amount (GST exclusive)
	Must be a number.

Budget

Please ensure all amounts shown in the budget are **GST exclusive**.

Total cost of equipment * This number/amount is calculated.

Amount requested from TPCHF * Must be a dollar amount

Other funding available Must be a dollar amount

Quote attachment * Attach a file:

Additional details

Please provide any details of additional or leveraged funding (confirmed or proposed)

Will there be any ongoing costs associated with the equipment? If so, how will this be funded? *

Please include costs such as maintenance and service contracts.

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APPLICATION CONDITIONS

* indicates a required field

Application Conditions

The following conditions apply to this application:

1. The applicants authorise The Prince Charles Hospital Foundation to make any enquiries it considers necessary in relation to the proposed application.
 2. Applicants agree to adhere to all requirements for procurement through their nominated administering institution, including asset approval and registration.
 3. Provisional approval from TPCH Foundation may be revoked if:
 - the applicant does not submit the documents required to obtain final administering institute approval within a reasonable timeframe
 - the administering institution rejects the subsequent request for equipment
2. If successful, the applicant agrees:
- To ensure that signage attributes the equipment to The Prince Charles Hospital Foundation.
 - That the equipment will be located at The Prince Charles Hospital
 - That the equipment will be owned by the purchasing institution, who is also responsible for all repairs, maintenance, replacements, insurances, use and warranties for the equipment
 - To honour any reporting requirements deemed necessary to acquit the funds
 - Be available to promote their research
 - Acknowledge TPCH Foundation on all material associated with the equipment and research project including PowerPoint presentations, flyers, event material, publications and all other items
 - According to standard TPCH Foundation funding rules, the grant is solely for the purpose of purchasing the equipment requested, and will not be used to pay institutional overheads.

Signatures

Click on 'Review' in the top left hand section of the application form under the 'Application Form Navigation' section. Then click the 'Download PDF' button on the Review page to print a draft copy for signatures, have all parties sign and then upload a PDF copy in the 'file upload' section below.

Signature of Applicant:

_____ Date: _____

Certification by Head of Department where the equipment will be stored/used:

I certify that the equipment is appropriate to my Department and that there is space to store the equipment in my Department.

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Name: _____

Department: _____

_____ Date: _____

(Signature)

Signature PDF *

Attach a file:

Submission Instructions

To submit your application please click on 'Review' in the top left hand section of the application form under the 'Application Form Navigation' section.

Please ensure you have attached your signed signature page and any other necessary documents and then click the 'Submit' button on the Review page.

You will be sent an email confirming your application has been received.

Thank you and all the best with your submission.