

# 2025 RBWH Research Fellowship Grants

## Form Preview

### Advice to Applicants

#### RBWH Research Fellowship Grants

The 2025 RBWH Fellowship Grants aim to support research capacity building at RBWH by funding dedicated research or backfill time for an individual to undertake research activities that align with hospital priorities. The 2025 Research Fellowship Grant scheme has been made possible by the RBWH Study, Education and Research Trust Account (SERTA) Advisory Committee.

In 2025, Research Fellowship Grants will be awarded in two categories:

- 1. Early career researcher (ECR) fellowships.** Six 1-year ECR Research Fellowships (up to \$40,000) are on offer with up to three being awarded for 2 years (up to \$80,000 in total). For this scheme, an ECR is defined as: (a) an individual within three years of completing a research higher degree (MPhil, PhD or equivalent), or (b) an individual who has not commenced or completed a research higher degree and is within 10 years of commencing active research as indicated by grants and publications. Note: for assessment, track record comparisons will be made within groups, not between groups ("a" and "b").
- 2. Research higher degree (RHD) scholarships.** Six 2-3 year RHD Scholarships (up to \$40,000 per year) are on offer with the possibility of 2 years of funding for undertaking an MPhil (or equivalent) or 3 years of funding for undertaking a PhD (or equivalent). Successful applicants must be enrolled in a RHD (MPhil, PhD or equivalent) for the duration of the scholarship.

Track record will have a relatively smaller weighting (10%) and consideration of career disruptions and "relative to opportunity" will be given.

#### Key Dates

**Open:** Monday, 24 September 2024

**Close:** Monday, 4 November 2024

**Notification of Outcomes** - December 2024

#### Eligibility

RBWH staff (individual applicants) are eligible to apply for an ECR Fellowship or RHD Scholarship, which are both referred to below by the terms "Research Fellowship" or "fellowship" (or "fellow" for a successful applicant). To be considered eligible for a Research Fellowship, applicants must:

- Be temporary or permanent employees of Metro North and based at RBWH for a minimum of 0.2 FTE during the fellowship.
- Nominate at least one appropriately qualified supervisor.
- Provide a proposal to develop and undertake a body of research aligned with RBWH priorities and/or directly involving RBWH patients, staff or community.
- Not be the recipient of a Metro North Health or Queensland Health Clinician Research Fellowship (or similar fellowship) during the RBWH Research Fellowship.

**It is the applicant's responsibility to ensure enough time is allowed for obtaining signatures, i.e. Line Manager, Principal Supervisor and Head of Department. Please consider the time frames of the administrative process and take into**

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**consideration public holidays and planned leave for delegates. Applications that are late and/or do not include the necessary signatures will not be accepted.**

### Applicant Information

\* indicates a required field

#### Applicant Details

##### Applicant Name \*

First Name

Last Name

##### Position \*

##### Position Type \*

Temporary  Permanent

Note: for applicants not meeting one of these employment categories in 2025, a letter requesting special consideration must be uploaded as part of the "Statement of RBWH Line Manager support."

##### FTE at RBWH \*

##### RBWH Department \*

##### Service Line \*

##### Email \*

Must be an email address.

##### Phone number \*

Must be an Australian phone number.

##### Gender \*

Female  Male  Non-binary/other

##### Are you of Aboriginal and/or Torres Strait Islander origin?

- Yes, Aboriginal  
 Yes, Torres Strait Islander  
 Yes, both Aboriginal and Torres Strait Islander  
 No

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Prefer not to disclose

**Scheme being applied for: \***

- Early career researcher fellowship - 1 year
- Early career researcher fellowship - 2 years
- Research higher degree scholarship - 1 year (MPhil, PhD, or equivalent)
- Research higher degree scholarship - 2 year (MPhil, or equivalent)
- Research higher degree scholarship - 3 year (PhD, or equivalent)

**For Early Career Researcher Fellowship applicants, are you:**

- Within 3 years of completing a Research Higher Degree (MPhil, PhD or equivalent)
- Have not started or completed a Research Higher Degree and are within 10 years of commencing active research

**For Research Higher Degree Scholarship applicants, what Research Higher Degree will you be undertaking in 2025?**

- MPhil
- PhD
- Other:

If other (please specify)

**Name of enrolled Institution (for Research Higher Degree scholarship applicants only)**

### Details of Principal Supervisor

(for Early Career Researcher applicants, specify your primary supervisor for the research program)

Name	Position	Department and/or Organisation	Email Address	Telephone Number

### Details of Associate Supervisors (if applicable)

Name	Position	Department and/or Organisation	Email address	Telephone number

### Research Program Porposal

**Full Research Project Title: \***

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**Brief Project Description: \***

Word count:  
Must be no more than 200 words.

**Background and Rationale: \***

Word count:  
Must be no more than 300 words.

**Research Aims/Objectives: \***

Word count:  
Must be no more than 200 words.

**Research Plan/Methods (must relate to the aims/objectives): \***

Word count:  
Must be no more than 1000 words.

**Potential significance and impact: \***

Word count:  
Must be no more than 200 words.

**How do you plan to incorporate consumer engagement within your research program? \***

Word count:  
Must be no more than 200 words.

**Outline key milestones within the Fellowship: \***

Word count:  
Must be no more than 200 words.

**Optional: upload any supporting material, e.g. reference list or images/tables/graphs, for the research program proposal.**

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Attach a file:

PDF only. Maximum of 2 pages.

### Research Capacity Building

**How will this Fellowship advance your own professional development? \***

Word count:

Must be no more than 200 words.

**How do you intend to use this Fellowship to actively engage in capacity building activities for your department or service line, RBWH and/or Metro North Health? \***

Word count:

Must be no more than 200 words.

### Research Environment

**Describe the infrastructure and resources that will be available to you during this Fellowship, including any grant funding you have obtained or intend to apply for. Please include any contingency management strategies you may have for unsuccessful funding opportunities or deviations from your original plans. \***

Word count:

Must be no more than 200 words.

**Describe the collaborations and supervisory supports that will be available to you during this Fellowship. Include details on the role and contribution of your supervisor/s during this Fellowship. \***

Word count:

Must be no more than 200 words.

### Track Record

**Summarise your research career to date and any other relevant experience. Your track record will be assessed relative to opportunity, so please highlight your achievements in this context and how your experience demonstrates long term potential. \***

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Word count:  
Must be no more than 200 words.

**Have you experienced any career interruptions in the last ten (10) years that you wish to disclose? Please provide details (e.g. parental leave or reductions in FTE and duration in weeks). Please do not include any details of a sensitive nature. \***

Word count:  
Must be no more than 200 words.

**CV (max 2 pages): \***

Attach a file:

PDF only.

## Requested Fellowship Salary Support

\* indicates a required field

### Budget

Specify your pay level, FTE and duration under "Description of personnel costs". Use a separate row for each year of requested funding.

Enter n/a and \$0 for rows not required.

Description of personnel costs	\$

Total funding requested:

\*

Must be a dollar amount.

**Business Manager approval \***

I confirm the Business Manager has reviewed and approved the amounts listed above in the budget table.

## Certification and Supporting Material

\* indicates a required field

### Applicant Supporting Material

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### Statement of RBWH Line Manager support \*

Attach a file:

This must include their support of reducing your FTE and be a signed letter or email from your Line Manager.

### Certification from Principal Supervisor \*

Attach a file:

### Certification by Head of Department Certification \*

Attach a file:

Note: if either your Line Manager or Principal Supervisor is Head of Department, then certification from the Service Line lead should be sought.

## Checklist and Declaration

\* indicates a required field

Please complete check list before submitting your application.

### You must confirm the below: \*

- Have you read and confirmed your ability to meet the eligibility criteria for this grant?
- Are you able to complete the outlined work within the grant timeframe?
- Have you attached a statement or signed support from your Line Manager, Principal Supervisor, Head of Department or Service Line Lead?

At least 3 choices must be selected.

### Applicant declaration \*

I state that the information in this application and attachments is to the best of my knowledge true and correct. I will notify RBWH Research Services of any changes to this information and any circumstances that may affect this application. I acknowledge that RBWH Research Services may refer this application to external peers for assessment, advice or comment. I understand that incomplete applications will not be accepted, and all decisions and recommendations of the judging panel are binding and final. If successful, I agree to submitting annual progress report/s and a final report.

### Confidential information (if applicable)

**Please specify any confidential information in this application that is requested NOT to be used in promotional materials by RBWH/Metro North Health.**

Word count:

Must be no more than 200 words.

