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**Support for 2019 ARC Discovery Early Career Researcher Award (DECRA)**

* **Establishment Grant requests**
* **Review of Statement by Administering Organisation**

***This document outlines****:*

* the MDHS application process for an ARC DECRA Establishment Grant
* the MDHS review process for the Statement by the Administering Organisation

The University of Melbourne (UoM) is a research-led University and the Faculty of Medicine, Dentistry and Health Sciences (MDHS) highly values its academic staff awarded competitive research fellowships. **The UoM/MDHS DECRA Establishment Grant** provides financial support to successful ARC DECRA employed in the Faculty. To apply for Establishment support please refer to the eligibility criteria and application form below.

As part of the ARC DECRA application, applicants must provide a **Statement by the Administering Organisation**. This statement is in the form of a letter signed by the Deputy Vice Chancellor Research (DVCR), describing how the research proposal and candidate are strategically aligned to institutional research strengths, and how the program of research and fellow will be supported by the University. To assist applicants prepare competitive proposals,Research, Innovation and Commercialisation (RIC),provide a template letter and guide (available on their [website](http://research.unimelb.edu.au/support/funding/arc/decra)), and **MDHS Research Development provide feedback on draft Statements.** Please refer to the details below on how to access this MDHS service.

*Note: The ARC DECRA scheme* ***does not*** *support Medical and Dental Research, as defined in the ARC DECRA* [*Funding Rules*](http://research.unimelb.edu.au/__data/assets/pdf_file/0011/2472770/Discovery_Program_Funding_Rules_2017_edition.pdf)*. Please review the* ***ARC Medical Research******Policy*** *available at* [*http://www.arc.gov.au/arc-medical-research-policy*](http://www.arc.gov.au/arc-medical-research-policy) *prior to application*.

All applicants intending to hold an ARC DECRA in MDHS must email the following documents to Suzy Ryan, MDHS Research Development [mdhs-grants@unimelb.edu.au](mailto:mdhs-grants@unimelb.edu.au) by **9am** **Monday 12 February 2018**:

* *If applicable* – a completed **MDHS Establishment Grant Application Form,** certified by the Head of Department (or Head of School for single department schools).
* A **draft Statement by Administering Organisation** **in word format** (Refer to the template on the [RIC website](http://research.unimelb.edu.au/support/funding/arc/decra)).
* A scanned copy of the signed **2019 ARC DECRA Strategic Statement Coversheet** (See [RIC website](http://research.unimelb.edu.au/support/funding/arc/decra)).
* A PDF copy of the **draft ARC DECRA application** (generated through RMS).*(The application will be used to assist with the review and editing of the Statement by Administering Organisation).*

*Note: To receive an eligibility and compliance check of your application, you must also submit a ‘Review Ready’ application to Research, Innovation and Commercialisation (RIC) by 13-15 February 2018. For details see the* [*RIC website*](http://research.unimelb.edu.au/support/funding/arc/decra)*.*

[**DECRA Establishment Grants**](http://research.unimelb.edu.au/work-with-us/funding/internal/establishment-grants-ff)

Eligible\* DECRA recipients may receive a one-off establishment grant up to a maximum of $50,000 (combined Chancellery and Academic Division support). Chancellery will offer a maximum of $25,000 per fellow, on the condition that this funding is matched on a 1:1 basis by Academic Divisions.

**MDHS Faculty funds can support eligible\* and successful ARC DECRAs with a grant minimum of $6,250 and up to a maximum of $12,500** on the condition that this funding is matched by the School/Department/Centre.

There are no restrictions on how the DVCR or Faculty funding can be expended, as long as it directly supports the ARC DECRA and their project. An Establishment Grant condition of award is that the DECRA is employed at the University and holds the DECRA at the University of Melbourne for its entire duration.  
*Note: The final approved Establishment Grant may be reduced in the event that the number of successful fellows exceed the budget for this program.*

\*Eligibility and conditions for Establishment GrantSupport

All prospective MDHS 2019 DECRA applicants are eligible to request Establishment Grant support. This funding is contingent on the successful DECRA recipient holding a salaried appointment in a budget Department of the Faculty at the equivalent time commitment as the fellowship (i.e. fellows receiving a full time fellowship from the ARC must hold a full time appointment at the University of Melbourne). Fellows that have previously received an MDHS Establishment Grant from the Faculty are not eligible for Faculty support under this scheme; however, the School/Department/Centre may wish to provide co-funding for consideration by DVCR. Please note, staff who are currently employed through a Medical Research Institute or MRI based Department, or wish to hold the DECRA in a MRI based Department, must contact MDHS Research Development to determine eligibility and cash co-contribution requirements for this scheme prior to application.

**Assessment of Establishment Grant Requests**

Research, Innovation and Commercialisation will advise faculties on the likely level of funding available for each applicant by making an assessment of:

1. The budget for the DECRA Establishment Grant Program;
2. The number of applications being submitted to the ARC; and
3. The anticipated overall DECRA success rate.  Where necessary, feedback/editing of the *Statement* *by Administering Organisation* may be required.

For further information or assistance, please contact Suzy Ryan in MDHS Research Development: T: 98344 7188 E: [mdhs-grants@unimelb.edu.au](mailto:mdhs-grants@unimelb.edu.au)

# **Medicine_Pos3D_HA4Application Form** **2019 ARC DECRA Establishment Grant**

# **Closing Date: 9am Monday** **12 February 2018**

Email the following to Suzy Ryan, MDHS Research Development: [mdhs-grants@unimelb.edu.au](mailto:mdhs-grants@unimelb.edu.au)

* This **MDHS Establishment Grant Application Form** completed (fully signed scanned copy)
* Draft **Statement by Administering Organisation** in Word format (refer to template on the RIC website)
* A scanned copy of the signed **2019 ARC DECRA** [**Strategic Statement Coversheet**](http://research.unimelb.edu.au/support/funding/arc/decra) (found on the RIC website)
* A pdf copy of the **draft DECRA application** (generated through RMS).

***Note:*** *To receive an eligibility and compliance check of your application, you must also submit a ‘Review Ready’ application to Research, Innovation and Commercialisation (RIC) by 13-15 February 2018. For details see the* [*RIC website*](http://research.unimelb.edu.au/support/funding/arc/decra)*.*

# APPLICANT DETAILS and CERTIFICATION

*For staff who are currently employed through a Medical Research Institute or MRI based Department, or wish to hold the DECRA in a MRI based Department*: I have contacted MDHS Research Development and understand the eligibility and cash co-contribution requirements for this scheme prior to application.

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| --- | --- |
| **Name** |  |
| **Date** |  |
| **Department/ School (hosting DECRA)** |  |
| **Current Position** |  |
| **Fraction of appointment (current)** |  |
| **Fraction of appointment (for DECRA)** |  |
| **Name of Head of Department/School (hosting DECRA)** |  |
| **Email address** |  |
| **Account details for payment** |  |
| **Signature of Applicant** |  |

# ENDORSEMENT FROM HEAD OF DEPARTMENT/SCHOOL HOSTING THE DECRA

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| --- | --- | --- | --- |
| I agree that the project can be accommodated within the general facilities in my Department/ School;  I am prepared to have the project carried out in my Department/ School;  If MRI based Department Director, I understand and agree to the eligibility and cash co-contribution requirements for this scheme. | | | |
| For eligible candidates, I agree to provide the following funding (one off payment)  $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| ***Signature of Head of  Department/School:*** |  | | |
| **Print name:** |  | **Date:** |  |