

Application: Viertel Clinical Investigator Awards 2026

Form Preview

Privacy Statement

Equity Trustees Limited, Equity Trustees Superannuation Limited, and Equity Trustees Wealth Services Limited ('the EQT Group') are committed to protecting your privacy and supporting the *Australian Privacy Principles under the Privacy Act 1988* (Cth).

Before submitting your application, please ensure you have read [Equity Trustees' Privacy Statement](#), to inform you of:

- the type of personal information that we collect;
- the manner in which we collect your personal information;
- the main purposes for which we use that information;
- how you can access, correct or update any personal information that we hold about you; and
- how we keep the information

If this Grant Application is successful, Equity Trustees may make public your name, project description, the name of your organisation and the grant amount awarded to you.

Instructions

Ensure that you read the Guidelines available on the Equity Trustees [website](#) before commencing your application.

- 1. Filling Out the Form** You can complete the form in any order. Use the **Form Navigation** menu on the right or the **Next** and **Previous** buttons.
- 2. Working in a Team** You may share your login with colleagues, but avoid editing the form simultaneously.
- 3. Saving Your Progress** The form saves automatically when you switch pages. Click **Save** before logging out or stepping away.
- 4. Submitting Your Form** Click **Submit** on the final **Review** page. The form won't submit if required fields are missing or if limits are exceeded. You will receive a confirmation email including a PDF copy of your form.

Further Support

Technical Support or Questions about Eligibility and Guidelines

Email Equity Trustees at charities@eqt.com.au, quoting your application number if applicable.

Important Information Regarding Word Formatting

If you draft your application in Microsoft Word and then paste your answers into this form, please turn off Word's automated bullets and numbered lists. These cause formatting issues when we print your application for assessment. Instead, manually type numbered lists, or use asterisks * or hyphens - in the place of bullets.

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If possible, please switch off Word's auto-formatting options for lists. You can then manually type numbered lists, or use asterisks * or hyphens - in the place of bullets.

Applicant Details

* indicates a required field

Administering Institution

Applicant's administering institution name *

Organisation Name

As per your ABN entity name below

ABN *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Clinical Investigator Award Applicant

Name (as used in citation metrics) *

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Current Position Title *

Department *

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Institution *

Postal Address *

Address

Proposed Position Title, if different from current *

Proposed Institution (and Department) if different from current *

Research Field (e.g. Computational Pharmacogenomics) *

Mobile Telephone *

Email *

Gender *

- Male
 Female

Applicant's Institutional Sponsor

*

Title First Name Last Name

Position Title *

Postal Address *

Address

Mobile Telephone *

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Email *

Research Grants Office

Contact Person (who will receive copies of correspondence relating to the Grant Application) *

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Position Title *

Mobile Telephone *

Email *

Postal Address *

Address

<input type="text"/>
<input type="text"/>

Project Summary

* indicates a required field

Project Title *

Summary of proposed research (written for a 'lay' audience) *

Word count:

Must be no more than 200 words

Budget & Compliance

* indicates a required field

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Project grant funds (excluding applicant's salary)

Note that institutional indirect costs and the applicant's salary cannot be paid from the Clinical Investigator Grant. Employee on-costs for any project research staff can be funded from the Grant, but only the mandated government costs (e.g. 12% superannuation; long service, annual and personal [sick] leave), as per the NHMRC policy on Salary Support Packages for Fellowship salaries. On-costs must not exceed 25% - please state the % applied for all salaries.

Provide the budget for the project in the table below. Note that the budget does not have to add up to the award amount (i.e. other sources of funding may cover some of the project cost - explain this in the Justification of Budget). The purpose of the budget is to provide reviewers with a general understanding of the manner in which the funds are proposed to be applied.

Budget items (Salaries, Consumables, Equipment, etc) Amount

Budget items (Salaries, Consumables, Equipment, etc)	Amount
TOTAL	

Justification of Budget *

Word count:

Must be no more than 500 words.

Ethics Approval

Ethics approval has been sought and/or approval obtained from Institutional Ethics Committees for any work involving human or animal experimentation. (Ethics approval is not required before submission, but the sponsoring institution is required to ensure the reserach project meets all governance requirements.) *

- Yes
- No

Referee Reports

Please follow the Referee Guidelines available on the Equity Trustees website. It is the **responsibility of the applicant** to ensure that both nominated referees have completed and emailed their referee reports to charities@eqt.com.au by the closing date. Applications where one or both reports have not been received by the due date will be considered ineligible.

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Name your files: **ViertelCI_<Applicant's surname>_<Applicant's Institution>_<Referee surname>.pdf**

e.g. **ViertelCI_Smith_UniMelb_Carter.pdf**

Referee 1 *

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

Referee 2 *

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

Supporting Documents – Format and Naming Convention

* indicates a required field

Please use Arial 11 pt in all supporting documents, with margins each side of 2.5 cm and single line spacing.

All files must be in PDF format unless Word, JPG/JPEG or Excel format is specified.

Application Combined PDF

Upload a **PDF** file with the following components of your application, in this order:

- 1.Photo and Biography (on one page)
- 2.Curriculum Vitae
- 3.Research Project
- 4.Research Funding
- 5.Publications
- 6.Institutional Sponsor (Head of Department) letter

Details of each component and its required contents can be found in the sections below.

Name your file: **ViertelCI_<Applicant's surname>_<Applicant's Institution >_Combined.pdf**

*

Attach a file:

PDF format only.

Upload Curriculum Vitae as part of your Combined PDF

Limit this to 5 pages and incorporate the following sections:

A. Details of academic background, including degrees, prizes, distinctions and other special qualifications awarded, stating where and when they were awarded.

B. Details of current appointment (and proposed, if different from current), indicating size of research group, availability of research infrastructure and any future changes that may impinge upon research opportunities.

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C. Details of previous appointments in chronological order.

D. Outline your research impact, and your contribution to the reach and significance of this impact to your field (**maximum 8,000 characters**).

E. Outline your leadership achievements (**maximum 8,000 characters**). This may include your contribution to training, mentoring and supervising students; postgraduate and undergraduate teaching; and, if relevant, industry/commercial activities or clinical duties and the impact of clinical sessions on your research project. With respect to research students indicate whether sole or co-supervision and include information on any completions.

F. Details of national and international recognition such as invited plenary lecture, peer review involvement (including grant application review for funding bodies, manuscript review), editorial board responsibilities, membership of executive committees or executive positions held, organisation of national and international meetings.

G. Details of consumer engagement and involvement in the wider community, including raising community awareness of health issues, science education forums etc.

H. Details of any current and/or past career interruptions and how they have impacted your career. Refer to the Guidelines and template available on the [Equity Trustees website](#) for outlining career interruptions and how they will be factored into assessment.

I. Any further information to support your application.

Career Disruptions Template (optional)

Outline your Career Disruptions and Career Circumstances within section H of your CV in your application. Request a copy of the Career Disruption Calculator Excel template from Equity Trustees (charities@egt.com.au) to determine the days of Career Disruption (only) that apply to your application. Upload this completed Excel file with your application.

Name your file: **ViertelCI_<Applicant's surname>_<Applicant's Institution>_Disruptions.xlsx**

Attach a file:

Excel format only.

Upload Research Project Details as part of your Combined PDF

Limit this to **seven pages (including references)** and incorporate the following headings:

- **Research impact and significance.** Refer to the NHMRC definition and types of [Research Impact](#) and justify one or more.
- **Research Plan** research aims, detail preliminary data, methods/techniques, sample size, etc.
- **References**

Upload Research Funding as part of your Combined PDF

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Limit this to **one page** and incorporate the following headings, providing the following information for each section: Type of award; Title of project; Role (e.g. CIA); Duration; Amount awarded:

- A. Past support - for previous six (6) years
- B. Currently held grants. Please ensure where the applicant's salary is funded by any current grants that you have noted this.
- C. Grant requests for the current year

Upload Publications as part of your Combined PDF.

See Guidelines available on the [Equity Trustees website](#) for the template provided to capture your publication information.

1. Provide a paragraph with your H index, total number of publications and total citations. What database is your citation count and **Field Weighted Citation Impact (FWCI)/ Category Normalized Citation Impact (CNCI)** information taken from? What date was it sourced on?
2. Provide a link to your preferred publication profile ID (ORCID, Scopus Author, Google Scholar). **PLEASE DO NOT FORGET TO ADD THIS LINK** to your Publications document.
3. Nominate your best 10 publications in the past 10 years (accounting for career disruptions, **maximum 500 characters for each citation**) using the table provided in the template. Explain why these publications have been selected, outlining the quality of the research and contribution to science (**maximum 1,000 characters for each justification**), and your role/contribution to each.
4. Provide a full list of publications – **numbered in chronological order and sorted in these subcategories**: Refereed journal article; Review; Book; chapter; any other publication; Patents (include status ie provisional application, completed application, granted – specify countries. Limit this section to 10 pages.

Link to your preferred publication ID *

Upload the signed Sponsor (Head of Department) Recommendation and Information as part of your Combined PDF

Please follow the Sponsor (Head of Department) Guidelines available on the [Equity Trustees website](#).

Photo

Upload a **high-resolution professional JPG/JPEG photo** of yourself. If you are shortlisted and invited to attend the Viertel Symposium for the shortlisted candidate interview, this photo will be used in the Viertel Symposium Booklet.

Name your file: **ViertelCI_<Applicant's surname>_<Applicant's Institution>_Photo.jpg**

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*

Attach a file:

JPG/JPEG format

Biography

Upload a short bio, with the first paragraph stating your current role, a paragraph outlining your research interests, and include any awards, fellowships or prestigious publications. If you are shortlisted and invited to attend the Viertel Symposium for the shortlisted candidate interviews this bio will be used in the Viertel Symposium Booklet.

Name your file: **ViertelCI_<Applicant's surname>_<Applicant's Institution>_Bio.docx**

*

Attach a file:

Word format.

Media-ready Project Summary

Upload a short media-ready summary of your project. If you are successful, this will be used for media and marketing purposes in announcing the award.

Name your file: **ViertelCI_<Applicant's surname>_<Applicant's Institution>_Media.pdf**

*

Attach a file:

Word format.

Proof of Research Doctorate Conferral

Upload Certificate of Conferral of Research Doctorate (years post-doc will be calculated from this date)

Name your file: **ViertelCI_<Applicant's surname>_<Applicant's Institution>_PhD Conferral.pdf**

Upload Proof of Research Doctorate *

Attach a file:

PDF format.

Application Checklist and Certification

* indicates a required field

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Application Checklist

The proposed project meets the Guidelines of the Grant Round * Yes

I have read the Privacy Statement on page 1 of this application and agree to the conditions therein. * Yes

Applicant Certification

By submitting this application:

- I certify that to the best of my knowledge the statements made in this Grant Application and supporting documents are true;
- I consent to the information contained within this Grant Application being disclosed to or by Equity Trustees for the purpose of assessing, administering and monitoring this and any future grant applications.

Please enter your name to confirm agreement of this Certification.

I, the Clinical Investigator applicant, acknowledge the above terms: * Yes

Name *

Position *

Institution Certification

- I understand that if Equity Trustees approves this Grant Application, my organisation will be bound by the contents of this Grant Application to carry out the project as described herein and in accordance with the grant conditions, timeline for completion and reporting requirements as set out in Equity Trustee's Grant Award Letter to the successful applicant.
- I attest that ethics approval has been sought and/or approval obtained from institutional ethics committees for any work described in the Grant Application involving human or animal I understand that my institution will be responsible for ensuring the research governance requirements for the Grant Application such as ethics approvals will be met for the entire tenure of the Grant if this applicant is successful in being awarded a Clinical Investigator Award.
- I attest that the Clinical Investigator applicant meets all the eligibility requirements, including being an Australian citizen, a permanent resident of Australia or a New Zealand citizen holding a Special Category (subclass 444) visa.

I, the Institution contact, acknowledge the above terms: *

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Yes

Institution Contact Name *

Position *