



Field Naturalists Society of South Australia LIRABENDA ENDOWMENT FUND - RESEARCH GRANTS 2024

APPLICATION FORM

This signed application form in Word version & in a PDF version, must be emailed, with subject: 'LEF Grant Application 2023' & your name, by 9pm Friday 16th Feb 2024 to both

LEF Co-ordinator Janet Pedler
& LEF Secretary Peter Matejic

Email: jpedler@senet.com.au
Email: pmatejci@bigpond.net.au

CLOSING DATE – Friday 16th February 2024

1. PROJECT TITLE

.....

2. APPLICANT DETAILS

Name:

Postal Address - Your Mailing address at the University, Research Institution or Organisation you are working with/within,
Or if, Independent Researcher/project, your personal mailing address

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State/Postcode:

Telephone Contact: Mobile Work/Other

Contact Email Address – Email at institution you work from OR if independent researcher personal email

W:

Institution/Organisation at which research will be conducted (if applicable), e.g. university, institute, organisation

Occupation and academic qualifications.

a) Present occupation.....

b) Academic Qualifications held and year completed

c) **If a student:**

1. Degree being studied

2. Year first enrolled 3. Proposed completion date

d) Most relevant research experience and most relevant publications to your project

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e) 1. If a Student:

Your Academic Institution & Supervisor

.....
Supervisor's contact email: Phone.....

If Organisation other than University:

Your Organisation & Your Manager

Manager's contact email: Phone

2. If Independent Researcher – give details of 2 independent referees relevant to project:

Referee 1:

Referee's contact email: Phone.....

Referee 2:

Referee's contact email: Phone.....

3. FUNDING

Other research grants relating to this project

a) Currently held:

.....
and/or

b) Applied for:

.....

If other grants are held or applied for, do these directly overlap with the section of this project for which Lirabenda Endowment Fund support is sought? YES/NO

If YES, explain the way(s) in which they overlap.

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TOTAL COST OF THIS PROJECT: \$.....

(a) Amount already granted from other funding sources for this project \$.....

(b) Amount sought from other funding sources for this project \$.....

(c) Amount sought from Lirabenda Endowment Fund: \$.....

Are any amounts under (a) or (b) above duplicated in (c)? YES/NO

If YES make the duplication clear in the Table of Project Costs below.

If the amounts requested in (b) are NOT granted is the project viable? YES/NO

If YES, please explain how the project will proceed without these additional funds.

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4. **PROJECT DESCRIPTION**

Include a detailed description of the project in 2-4 pages (*no more than four A4 pages; additional pages will not be considered*).

Include the project description in this word document, submit map as separate document to application if needed. The following headings are provided to ensure relevant information included:

- 4.1 Title & Brief Summary of Project (*ca.* 100 words)
- 4.2 Aims
- 4.3 Methods
- 4.4 Research schedule
- 4.5 Project Location(s) – attach a map if needed
- 4.6 Expected Outcomes
- 4.7 List of references cited in above description

5. PROJECT COSTS

FOR EACH ACTIVITY TO BE UNDERTAKEN, please itemise the costs involved for: materials, travel, accommodation etc. Vehicle costs to be computed at a flat rate of 68 cents per kilometre.

State items for which you are requesting support from the Lirabenda Endowment Funds.

[Please refer to General Requirements (c) in the Guidelines]

If there is not enough room please expand table.

| Activity and Items | \$ | Funding Source |
|--|----|----------------|
| Name each activity to be undertaken. Actual operating costs where appropriate. | | |
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| Total: | | |

6. PAYEE

(The organisation to which the grant should be paid on behalf of the applicant. If the Payee is the applicant as for private research projects - 'as above' is sufficient)

Institution or Organisation & Researcher name or Student name
e.g. Adelaide University Research Office/Sam Manus

.....

Address:

Postcode:

Contact Person/Supervisor:

Telephone:

7. PROJECT DATES: Date Project can commence:

Expected date of completion:

8. REFEREES

Names and contact details for two referees (who are relevant to the research project).

Name:

Name:

Address:

Address:

.....

.....

Email:

Email:

Phone:.....

Phone:.....

9. DECLARATION

I hereby apply for a Lirabenda Endowment Fund Research Grant and agree to all requirements (a–n in the General Requirements as stated) of the Lirabenda Endowment Fund.

Name of applicant.....

Signature of applicant..... Date.....

If applicant is a student:

The applicant will be carrying out the above research project under my supervision.

Name of supervisor.....

Signature of supervisor..... Date.....

AUTHORISATION – to be completed by the Department Head or Chief Executive Officer

This organisation fully supports this application. If a LEF grant is awarded, work will be undertaken pursuant to grant conditions and in accordance with this institution’s research policies.

Name

Position

Signed