

Multiple Myeloma Ireland Myeloma or AL Amyloidosis Research Grant

2025

Application form

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Title of the proposed project

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Details of the Applicant

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| **Applicant’s Name:** |  |
| **Title** |  |
| **Address** |  |
| **Contact Number** |  |
| **E-mail** |  |

**Present Position**

*Please give details of your present position (including start and end dates). Provide an approximate breakdown (%) if your current appointment is divided between clinical/service, teaching, research and any other commitments (where relevant) (250-word limit).*

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**Q. 1 Employment History**

*Please give your employment history to date i.e. title of position held, name and address of the institution/organisation and start/end dates. Include details of any breaks in your career (if relevant) and state the time periods. (250-word limit)*

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**Q. 2 Academic /Professional Qualifications**

*Give details of all relevant academic/professional qualifications i.e. state the qualification, class, awarding institution, start and end date.*

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**Q. 3 Research experience to date**

*Describe any research experience you have to date and give specific details of your role, where relevant. (300-word limit)*

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**Q. 4 Publications**

*List below your most recent relevant publications in peer reviewed journals (if any). Where appropriate, include any other relevant reports or health-related publications you have authored.*

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**Q. 5 Mentoring Arrangements**

*A detailed outline of the appropriate mentoring arrangements to provide appropriate academic support, research guidance and training. (200-word limit)*

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**Q. 5 Career plan**

*Please explain why you are applying for this grant, describing how it fits in with your research focus and/or your future career plan. (300-word limit)*

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Q. 6 Details of the Research Team

* *A strong team with the appropriate breadth, depth and potential to deliver the Project Development Grant*

*is essential*

* *Please fill in the following table for each Co-Applicant and official Collaborator associated with the research project development grant. If more tables are required please copy and paste as necessary*.

**Co-Applicants and Collaborators**

**Co-Applicants 1**

|  |  |
| --- | --- |
| **Name:** |  |
| **Title** |  |
| **Address** |  |
| **Contact Number** |  |
| **E-mail** |  |
| **Present position:** |  |
| **Please briefly describe how this Co-Applicant will contribute to the research project** |  |

**Collaborator 1**

|  |  |
| --- | --- |
| **Name:** |  |
| **Title** |  |
| **Address** |  |
| **Contact Number** |  |
| **E-mail** |  |
| **Present position:** |  |
| **Please briefly describe how this Collaborator will contribute to the research project** |  |

**Collaborator 2**

|  |  |
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| **Name:** |  |
| **Title** |  |
| **Address** |  |
| **Contact Number** |  |
| **E-mail** |  |
| **Present position:** |  |
| **Please briefly describe how this Collaborator will contribute to the research project** |  |

**Q. 7 Host Institution**

*Please indicate your intended Host Institution for the duration of this grant.*

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**Q. 8 Host Institution Infrastructure and support**

*Describe the infrastructure, facilities and other support available at the Host Institution and any other sites where the research will be undertaken. (300 word limit)*

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Context for the Multiple Myeloma or AL Amyloidosis Research Grant

**Q. 9 Proposed commencement date and duration**

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| Date: |
| Duration (in months): |

**Q. 10 Project Abstract**

*The project abstract should be a clear synopsis of your proposal including the specific aims and objectives, design and methodology of the research (as appropriate). (300 word limit)*

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**Q. 11 Project LAY Abstract**

*The project LAY abstract is a snapshot of the abstract written in plain language that makes it easy for a lay person to understand what the study proposes to do and how it will be undertaken. (150 word limit)*

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**Q. 12 Aims and Objectives** (300-word limit)

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**Q. 13 Research design and methodological approach** (500-word limit)

*A well-developed and detailed description of the proposed project that allows an assessment of any proposed research methods.*

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**Q. 14 Ethical Considerations**

*Detailed approach to Ethical considerations where applicable (500 words limit)*

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**Q. 15 List key references cited** (20 references limit)

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**Q. 16 Timelines and deliverables** (250-word limit)

*The project management plan for this development project should set out the packages of work and their timetable. You must provide a* ***Gantt chart*** *(or equivalent) outlining the estimated timelines/deliverables and outputs*

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**Q. 17 Public and Patient Involvement (PPI)**

*Please provide a summary of who your PPI group are and what involvement the group will take. This can be one of the following throughout the project or different approaches at each stage 1) Consultation, 2) Collaboration, 3) User Controlled. (500-word limit).*

More information on PPI is available here:

<https://www.cancer.ie/cancer-research/about-our-cancer-research/public-and-patient-involvement>

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**Q. 18 Impact Statement**

*The impact abstract should clearly describe who benefits from the proposed study and in what ways. Also include a list of people involved in the research, other than yourself (e.g. collaborators, institutions) and what each will contribute to the study. (300 word limit)*

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**Q. 19 Budget**

*Under each heading please provide a sub heading as a breakdown of individual costs within the overall grant.*

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| **Item name** | **€** |
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|  |  |
|  |  |
| **Total** |  |

*Please provide justification for each amount requested under the following headings.*

|  |  |
| --- | --- |
| **Item name** | **Justification** |

Multiple Myeloma Ireland Myeloma or AL Amyloidosis Research Grant 2025

SIGNATURE PAGE

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| **Applicant**  I am submitting this application to Multiple Myeloma Ireland to be considered for funding under the Multiple Myeloma or AL Amyloidosis Ireland Research Grant.  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name (Printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Conflict of Interest Statement**

**Applicant**

Please insert a disclosure statement in the box below. If you have nothing to disclose, please write: “XXX has nothing to disclose.” If you have relationships which could be considered conflicts of interest in relation to the manuscript, please write a brief summary of the information given in this form.