

# Help Manual for Completing Versitech (VXF) Electronic Application Form

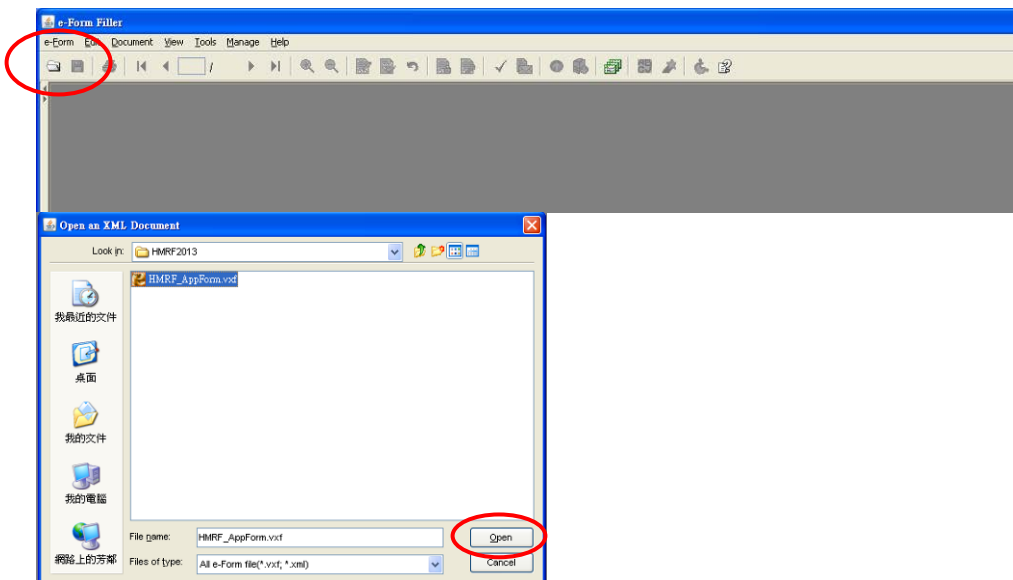
## (A) Minimum System Requirements

To access offline electronic application form, your computer will need to meet minimum system requirements.

- IE 11 or Safari 7+
- Enable Transport Layer Security (TLS) version 1.2 in the browser
- 1280 x 1024 Minimum Screen Resolution
- Java SE Runtime Environment (JRE) 7 or 8

### Operating System

- Microsoft Windows running 7/8
- Apple Mac OS x 10.5 or above
- Fedora Linux Core 7 or above



e-Form Filler- to open the  
the VXF file

For example:

Open the VXF file from  
the Computer

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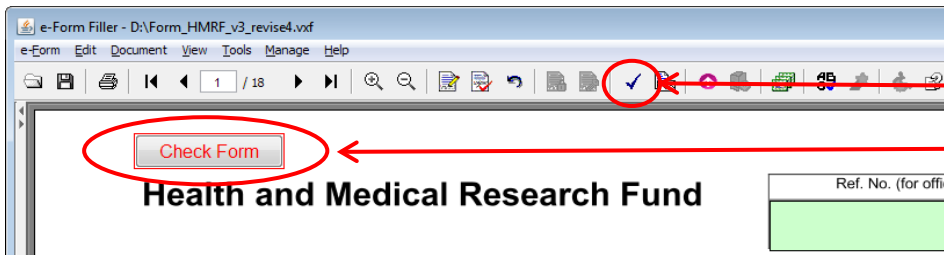
## (B) Basic Functions



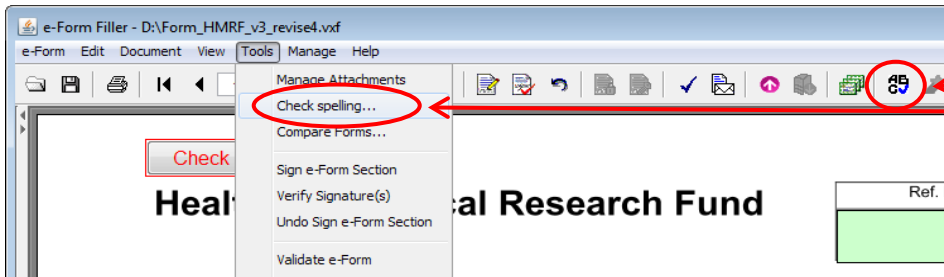
“Help” button - to open the Help manual for completing the e-Form

### Health and Medical Research Fund RESEARCH GRANT APPLICATION FORM

Important Notes:



“Check Form” button - to validate the information entered on the application form



“Spell Check” button

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## (C) Complete the e-Form

**Health and Medical Research Fund**

Ref. No. (for official use)

## RESEARCH GRANT APPLICATION FORM

*The personal data provided in the application form will be used by the Research Council, Grant Review Board and the Secretariat for the purpose of assessing applications to the Health and Medical Research Fund (HMRF). For successful applications, such data will also be used for project monitoring, research and statistical analysis, promotion, publicity and dissemination purposes as appropriate.*

**Area of research (select one of the following only):**

- Public health, human health, health services and Chinese medicine
- Prevention, treatment and control of infectious diseases
- Advanced medical research

Please refer to Explanatory Notes in preparing this application form.

**1. SUBMISSION**

- New Project       Re-Submission (Quote Previous Ref. No.: )

Rating of previous submission:

**2. FUNDING REQUEST**

- HK\$100,001 – HK\$1.2Million     HK\$100,000 or below

**4a. Proposed Research Field**

Primary

Group	Field
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
	Please specify: <input style="width: 80%;" type="text"/>

Secondary

Group	Field
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
	Please specify: <input style="width: 80%;" type="text"/>

**6. PROPOSED START AND END DATES (dd/mm/yyyy).**

6a. Start Date:  6b. End Date:  6c. Grant  months

**7. SUMMARY OF FINANCIAL SUPPORT REQUESTED**

(dd/mm/yy)	01/04/ - 31/03/	01/04/ - 31/03/	01/04/ - 31/03/	01/04/ - 31/03/	Total (HK\$)
Staff					
Other Expenses					
Equipment					
<b>Sub-total</b>					
<b>Grand Total</b>					

**Resubmission** - enter the rating of the previous application and attach the structural responses to the Grant Review Board

**Proposed Research Field** - select the proposed area from "Group" and "Field", specify the details if "Other" from "Group" or "not elsewhere classified" from "Field" is selected

Applications submitted should not expect to start before 1 December next year.

**Summary of Financial Support** - data in item 7 will be auto-filled after completing item 10

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## 9. APPLICANTS (PROJECT TEAM)

Principal Applicant	
Title (Prof/Dr/Mr/Mrs/Ms)	
Last name	
First name	
Current post(s)	
Department	
No. of hrs/week on project	
Full address	Department
	Institution
	Rm/Floor
	Building
	Street
	Area / City
	Country / Territory
	HONG KONG
Tel (direct/secretary)	
Fax	
E-mail	Confirm

**Email address-** the email address must be endorsed by AI

**Co-Applicant -** Add extra page to complete information for Co-Applicant

Add 0 extra co-applicants

## 10. DETAILS OF FINANCIAL SUPPORT REQUESTED

### 10a. STAFF DETAILS

Types of Staff	Details of Posts			Salary/ Month	Efforts on Project	No. of Months Required	Staff Costs for Entire Project
	Rank	Pay Scale & Point	(A) No.	(B) HK\$	(C) %	(D)	AxBxCxD HK\$
<b>Research Staff</b>							
<b>Other Supporting Staff</b> (e.g. secretarial, clerical, administrative)							

**Sub-total -** automatically calculated

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## 10b. STAFF COSTS (To the Nearest HK\$)

The table for staff costs is annotated with red boxes and arrows. A red circle highlights the first financial year cell (01/04/ - 31/03/). A red box encompasses the three financial year columns, with an arrow pointing to them from the 'Breakdown' text. Another red box encompasses the 'Total (HK\$)' column, with an arrow pointing to it from the 'Financial Year' text. The table has three main sections: Research Staff, Other Supporting Staff, and a Total Annual Costs row at the bottom.

Financial Year (dd/mm/yy)	\$			Total (HK\$)
01/04/ - 31/03/	01/04/ - 31/03/	01/04/ - 31/03/	01/04/ - 31/03/	
<b>Research Staff</b>				
<b>Sub-Total</b>				
<b>Other Supporting Staff</b>				
<b>Sub-Total</b>				
<b>Total Annual Costs</b>				

**Financial Year** - enter the 1<sup>st</sup> financial year only, subsequent years will be auto-filled.

**Breakdown** – complete the figures for three financial years

## 10c. OTHER EXPENSES (To the Nearest HK\$)

The table for other expenses is annotated with red boxes and arrows. A red circle highlights the first financial year cell (01/04/ - 31/03/). A red box encompasses the 'Total (HK\$)' column, with an arrow pointing to it from the 'Financial Year' text. The table lists various expense categories: Conference (i.e. Travel and subsistence), Publication costs, Reference materials, Audit Fee, and Incentives for subjects. It also includes empty rows for additional expenses and a Sub-total row.

Please specify (itemise in detail)	\$				Total (HK\$)
Financial Year (dd/mm/yy)	01/04/ - 31/03/	01/04/ - 31/03/	01/04/ - 31/03/	01/04/ - 31/03/	
Conference (i.e. Travel and subsistence)					
Publication costs					
Reference materials					
Audit Fee					
Incentives for subjects					

**Financial Year** - enter the 1<sup>st</sup> financial year only, subsequent years will be auto-filled

**Sub-total** - automatically calculated

## 10d. EQUIPMENT (To the Nearest HK\$)

The table for equipment is annotated with red boxes and arrows. A red circle highlights the first financial year cell (01/04/ - 31/03/). A red box encompasses the 'Unit Price (HK\$)' column, with an arrow pointing to it from the 'Unit Price' text. The table lists various equipment categories and includes empty rows for additional entries. The 'Unit Price (HK\$)' column is highlighted with a red box.

Please specify (itemise in detail)	\$			Unit Price (HK\$)	Total (HK\$)
Financial Year (dd/mm/yy)	01/04/ - 31/03/	01/04/ - 31/03/	01/04/ - 31/03/		

**Financial Year** - enter the 1<sup>st</sup> financial year only, subsequent years will be auto-filled

**Unit Price** - must be  $\geq$  \$10,000



# Help Manual for Completing Versitech (VXF) Electronic Application Form

**11. OTHER SUPPORT, SIMILAR OR RELATED PROPOSALS AND TRACK RECORD**

THIS APPLICATION

**11a. (i)** Have any of the applicants listed in Section 9 submitted this or a similar research proposal to HMRF or any other funding in the past 3 years?  YES  NO

If yes, please provide the following details:-

No.	Project Title	Name of Investigator(s)	Project Ref No.	Funding Agency	Outcome
1					
Previous application		 <a href="#">Click here to attach file</a>	The review panel's feedback (if any)		 <a href="#">Click here to attach file</a>
<p>Please give a brief response to the points mentioned in the <u>attached</u> review panel's feedback (if any), highlight the major changes that have been incorporated in this application. Applications declined for any reason by other research funding organisations will be accepted only if the reasons for the rejection have been described in detail and a point-by-point response is provided describing how these issues have been addressed.</p> <div style="background-color: #ffffcc; height: 150px; border: 1px solid black;"></div>					

**Similar Proposal -**  
complete this part if "Yes"  
is selected

**Extra Similar Proposal –**  
add extra page to  
complete information for  
additional similar proposal

Add  extra pages

# Help Manual for Completing Versitech (VXF) Electronic Application Form

- (ii) Is this or a similar research proposal currently submitted or intended to be submitted to HMRF or any other funding agency (local or overseas) by any of the applicants listed in Section 9 above in the next 6 months?  YES  NO

If yes, please provide the following details:-

**All applicants are required to notify the Research Fund Secretariat once funding result is available.**

No.	Project Title	Name of Investigator(s)	Project Ref No.	Funding Agency	Expected Date of Decision (dd/mm/yyyy)
1					

**Similar Proposal -**  
complete this part if "Yes"  
is selected

Please give a summary of the similarities and differences between this and the proposal to be submitted (400 words max)

**Extra Similar Proposal –**  
add extra page to  
complete information for  
additional similar proposal

Add  extra pages

# Help Manual for Completing Versitech (VXF) Electronic Application Form

OTHER APPLICATIONS AND TRACK RECORD

**11b.** Have any of the applicants listed in Section 9 been awarded research grant(s) from HMRF or other funding agencies (local or overseas) in the past 3 years?  YES  NO

(i) Details of research grant(s) funded or undertaken by PA (in a PA/ Co-A capacity)

No	Project Title	PA/ Co-A	Project Ref No.	Funding Agency	Funding Amount(\$)	Start Date (dd/mm/yyyy)	Completion Date (dd/mm/yyyy)	Time Spent by PA on the Project (hrs/ %)
1								

**Award from other Funding Agencies -** - complete part (i) for PA and/or part (ii) for Co-A if "Yes" is selected

Please give a summary of the similarities and differences between this and the proposal to be submitted (400 words max)

**Extra Award from other Funding Agencies –** add extra page to complete information for additional award

Add  extra pages





# Help Manual for Completing Versitech (VXF) Electronic Application Form

**11b.** Have any of the applicants listed in Section 9 been awarded research grant(s) from HMRF or other funding agencies (local or overseas) in the past 3 years?

(ii) Details of research grant(s) funded or undertaken by Co-A

No	Project Title	Name of Investigator(s)	Project Ref No.	Funding Agency	Funding Amount(\$)	Start Date (dd/mm/yyyy)	Completion Date (dd/mm/yyyy)
1							

**Award from other Funding Agencies -** - complete part (i) for PA and/or part (ii) for Co-A if "Yes" is selected

Please give a summary of the similarities and differences between this and the proposal to be submitted (400 words max)

**Extra Award from other Funding Agencies** – add extra page to complete information for additional award

Add  extra pages

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**Check Form**

Project Title: \_\_\_\_\_

Principal Applicant: \_\_\_\_\_

## Administering Institution

This application should be endorsed and submitted by / through (i) the Head of Department, (ii) the officer who will be responsible for administering any grant that may be awarded and (iii) the finance officer who will be responsible for overseeing / administering the related finance matters. Each party should be asked to complete the following declaration.

I certify that the statements herein are true, complete and accurate to the best of my knowledge, and accept the obligation to comply with the Standard Conditions of Research Grant if a grant is awarded as a result of this application.

Signature of HEAD OF DEPARTMENT \_\_\_\_\_

NAME (BLOCK)

DATE \_\_\_\_\_

INSTITUTION/DEPARTMENT \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

CONFIRM EMAIL ADDRESS \_\_\_\_\_

**Email Address-** the email address of Head of Department must be registered by AI,

Authorised Signature on behalf of ADMINISTERING INSTITUTION \_\_\_\_\_

POSITION HELD

NAME (BLOCK)

DATE \_\_\_\_\_

Signature on behalf of FINANCE OFFICER / TREASURER \_\_\_\_\_

NAME (BLOCK)

DATE \_\_\_\_\_

ADDRESS of FINANCE OFFICER /  
TREASURER

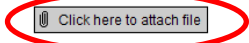
TEL:

FAX:

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## 13. PROPOSED RESEARCH PROJECT

Please attach the research proposal in pdf format:



**Research Proposal** - use [WORD template 13\(a\)](#) – (h) available from RFS website and attach the PDF file here

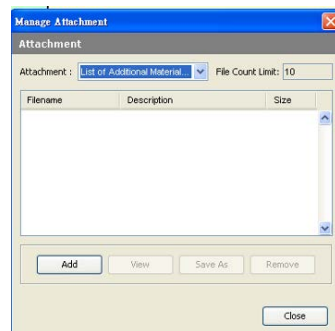
### (i) List of additional materials

No.	Description
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

**Additional materials** - enter the description of additional materials



**Additional Materials** - attach the PDF file(s) of additional material(s) according to order on the list.



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**13(k) Research ethics / safety approval**

Note: The primary responsibility of seeking the relevant approval rests with the principal applicant (PA).

Please tick '✓' the appropriate boxes to confirm if approval for the respective ethics and/or safety issues is required and has been obtained or is being sought from the PA's institution. In particular, a Clinical Trial Certificate or Medicinal Test Certificate from the Department of Health is required for research grant applications that involve clinical trials on human beings or medicinal tests on animals.

Copies of written documentation of approval issued by proper authorities, or of application for approval, should be submitted in good time and preferably with the application.

Research ethics / safety approval	Approval not required	Approval being sought	Approval obtained
Approval from a <u>recognised ethics committee</u> is required for (i) to (iii) below:			
(i) Human research ethics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(ii) Animal research ethics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(iii) Survey research ethics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For clinical trials on human beings or medicinal tests on animals			
(iv) Clinical Trial Certificate from Department of Health (Cap. 138A, Regulation 36B)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Approval from the administering institution's <u>Safety Officer, or equivalent</u> , is required for (v) to (viii) below;			
(v) Biological safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(vi) Ionising radiation safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(vii) Non-ionising radiation safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(viii) Chemical safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(ix) Any other approval <i>Please specify</i> <input style="width: 150px; height: 15px;" type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Ethics Approval -**  
specify required approval  
other than the above here

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## 14. REPORT ON PREVIOUS RESEARCH GRANTS FROM THE HEALTH AND MEDICAL RESEARCH FUND (HMRF), THE RESEARCH FUND FOR THE CONTROL OF INFECTIOUS DISEASES (RFCID), THE HEALTH AND HEALTH SERVICES RESEARCH FUND (HHSRF) AND THE HEALTH CARE AND PROMOTION FUND (HCPF)

For each of the above grants which you or any of your co-applicants have held as Principal Applicant and which has begun in the past 3 years, please give the information requested below.

Project Reference No.: <input type="text"/>		
Project Title: <input type="text"/>		
Started on: (dd/mm/yyyy) <input type="text"/>	Completed / To Complete on: (dd/mm/yyyy) <input type="text"/>	Final Report Submitted on: (dd/mm/yyyy) <input type="text"/>
Principal Applicant: <input type="text"/>		
Current perception of significance: <input type="text"/>		
Scientific papers directly resulting from this grant: <input type="text"/>		
Reasons for delay in the submission of interim, final and/or dissemination reports, if applicable: <input type="text"/>		

Add  extra page:

**Previous award from HMRF, HHSRF, RFCID and HCPF - add extra page to complete additional award**

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## 15. CURRICULUM VITAE AND ROLES & RESPONSIBILITIES OF ALL APPLICANTS

Principal Applicant		
Title:	<input type="text"/>	Last name: <input type="text"/>
First name:	<input type="text"/>	
Education/Training:		
<input type="text"/>		
Position and Honours (in reverse chronological order with dates):		
<input type="text"/>		
Recent Relevant Publications:		
<input type="text"/>		
Role and Responsibility on the Proposed Project:		
<input type="text"/>		

CV - name of Project Team Member will be auto-filled

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**CONFIDENTIAL**

## NOMINATION OF OVERSEAS REVIEWERS (For Internal Reference of the Research Fund Secretariat Only)

Ref. No. (official use only)	
Project Title:	
Principal Applicant:	

**Details of proposal will be auto-filled**

- (a) The Principal Applicant is strongly encouraged to nominate up to three overseas experts whom they consider qualified to review this application. Nomination of experts with experience in specialised fields is particularly welcome. Your nominations will greatly enhance the quality and speed of the review process. The Secretariat shall invite appropriate experts to review the application.

**Expert #1**

Title (Prof/Dr/Mr/Mrs/Ms)	
Last name	
First name	
Position	
Department	
Organisation	
Address Rm / Floor	
Building	
Street	
City	
Country	
Postal Code	
Tel	
Fax	
Email	
Area of expertise	
<b>Group</b>	<b>Field</b>
	Please specify: <span style="background-color: #ffffcc;"></span>

**Nomination - complete this part, if any**

Add 0 extra experts



**Additional Nomination - add extra page to enter additional nomination**

# Help Manual for Completing Versitech (VXF) Electronic Application Form

(b) Please declare any past or present significant personal and/or professional relationship between any of the applicants listed in Section 9 and the nominated experts. Refer to the Explanatory Notes for examples of significant personal and/or professional relationships.

Nature of relationship (please elaborate)	Expert		
	1	2	3
Supervisor or Supervisee of PhD or MPhil studies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advisor or Advisee in research studies/ research projects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Colleagues in the same organisation (please specify if in the same department)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Collaborators in research projects/ programmes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Co-authors of papers/ patents / publications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partner or co-organisers of major events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Long-time personal friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teacher at undergraduate studies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fellow members of the same editorial board	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other: please specify in (c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Declaration of Interest with Nominee -**  
complete this part, if any

(c) Please indicate the name of PA/ Co-A and the nature of the relationship declared in (b) (e.g. when and where the relationship was/ is developed, name/ nature of project, publications or events involved.)

1 Nature of relationships to:

---

2 Nature of relationships to:

---

3 Nature of relationships to:

---

Specify the details here if "Other" is selected

**Error** – mouse click the relevant error box and the system will guide you to the field with error concerned



# Help Manual for Completing Versitech (VXF) Electronic Application Form

## RESEARCH GRANT APPLICATION FORM

