



Raine Priming Grants

Certification Form

(1) Applicant and Associate Investigator(s)

(To be signed by all Investigators)

I/We declare that as Investigators named in this application, we have agreed to take part in the proposed research; and we further understand and agree that:

- (a) research which involves human or animal experimentation must be carried out in accordance with the guidelines set down in the NHMRC code of practice;
- (b) research which involves the use of recombinant nucleic acids constructed *in vitro* from sources which do not ordinarily recombine genetic information must be carried out in accordance with the guidelines set down by the Office of Gene Technology Regulator (OGTR);
- (c) research which involves the use of ionising radiation must have the risks involved assessed by a recognised Ethics, Safety or Bio-safety Committee before payment of any proposed grant can be made.

Signature of Applicant

Full Name	
Signature	Date

Signature of Associate Investigator(s)

Full Name	
Signature	Date

Full Name	
Signature	Date

Full Name	
Signature	Date

Full Name	
Signature	Date

(2) Mentor

I certify that I have read the application and confirm that I shall provide guidance and support in relation to this project during the term of the Grant.

Full Name	
Signature	Date

(3) Head of School or Director of Centre/Institute

I certify that:

- (a) the above project is acceptable and appropriate to the general facilities in the School/Centre/Institute;
- (b) the application has been reviewed by the applicant's mentor;
- (c) the budget costings have been checked by the School Manager (or equivalent Officer).

Full Name	
Signature	Date