



Australian Government
Australian Research Council

Pease send the completed form to
Programs Management Section
By FAX: 02 6287 6638 or
MAIL: Australian Research Council,
GPO Box 2702, Canberra ACT 2601

ELIGIBILITY EXEMPTION/RULING REQUEST

Discovery Projects

Check List for Administering Organisation Research Office

Please submit a completed check list for each Discovery Project (DP) Proposal for which one or more Eligibility Exemptions or Eligibility Rulings are being sought. Only include the pages for the type of Eligibility Exemption or Eligibility Ruling requested. (An individual DP proposal may request more than one 'type' of eligibility ruling on this form.)

REQUIRED DOCUMENTS

Type of Eligibility Exemption/ Eligibility Ruling Request		Supporting Documentation Required
1	<input type="checkbox"/> Medical or Dental Research – Eligibility Ruling	Summary of Medical or Dental Research proposal (Form 1)
2	<input type="checkbox"/> Fellowship candidate (APD, ARF or QEII) – Eligibility Exemption	Statement of candidate's circumstances and justification for exemption - Proposed Fellow (Form 2)
3	<input type="checkbox"/> Other (please specify)	Appropriate documentation (Form 3)

ADMINISTERING ORGANISATION RESEARCH OFFICE TO COMPLETE

I certify that all details on this form are true and correct:

Title/Name of responsible officer: _____
(DVCR or equivalent or delegate)

Signature of responsible officer: _____

Position of responsible officer: _____

Date signed ___/___/___

ARC TO COMPLETE

Type of Eligibility Exemption/Eligibility Ruling Request:		Eligibility Exemption approved or favourable eligibility ruling granted? Y/N	Identification Number for successful Exemptions/Rulings
1	Medical or Dental Research		
2	APD candidate <name>		
	ARF candidate <name>		
	QEII candidate <name>		
3	Other		

Comments/Issues:

Reason(s) Eligibility Exemption/Ruling request not approved:

Signature of ARC delegate _____

Title/Name of ARC delegate _____

Date signed ____/____/____

Date response letter sent to Research Office: ____/____/____

FORM 1 MEDICAL OR DENTAL RESEARCH ELIGIBILITY RULING REQUEST

(Maximum of two pages)

Proposed Project Leader (CI or Fellow): _____

Proposed Administration Organisation: _____

Proposal Title: _____

Name of all proposed Investigators	Researcher Role	Organisation Name
<i>eg: Title/First/Family Name</i>	<i>CI or PI or Fellow</i>	<i>Organisation</i>

(Add more or delete rows in the table above as required and expand on the following questions.)

Broad Research Area: _____

Field of Research: _____

Keyword/Phrases (to describe the field of research more specifically): _____

Identify the health issues or disease relevant to the research: _____

Proposal Description (in plain English): _____

Does the Proposal involve the treatment of patients and/or clinical trials?

YES/NO

If yes, please describe: _____

FORM 2 PROPOSED FELLOWSHIP ELIGIBILITY EXEMPTION

(Please complete one form for each fellowship exemption requested with a maximum of 2 pages per request)

Proposed Project Leader (CI or Fellow): _____

Proposed Administration Organisation: _____

Proposal Title: _____

Type of Fellowship being sought: APD ARF QEII

Type of Fellowship Exemption Requested:

- 1 Proposed Fellow does not hold a PhD but has an equivalent research qualification or experience – provide evidence that their research is equivalent to a PhD and provide details of time at which they were awarded/achieved the requisite qualification/experience
- 2 * Proposed Fellow's qualification or experience does not accord with timing requirements specified in Section 5.5 of the Discovery Projects Funding Rules:
- a. For APD candidates please provide details and justification in support of exemption of the requirement for the candidate to have been awarded a PhD on or after 1 March 2004 (including details regarding the date of award of the qualification).
- b. For ARF/QEII candidates seeking their first ARF or QEII please provide details regarding the date of award of PhD and provide justification for exemption of the requirement for them to have had eight years or less professional experience since the award of their PhD.
- c. For ARF/QEII candidates seeking their subsequent ARF or QEII please provide details regarding the date of award of PhD and provide justification for exemption of the requirement for them to have had 13 years or less professional experience since the award of their PhD.

* Note: justification can, among other things, include reasons such as research career interruption, eg non-research employment, misadventure, carer responsibilities.

Name of Fellowship candidate _____

Type and Date of PhD or Equivalent Qualification awarded:

Qualification: _____ Date of Award: (mm/yy): _____

Research Experience Gained (Total months/years since PhD): _____

