



APPLICATION SIGNATURE/COVER PAGE

APPLICANT NAME	
PROJECT TITLE	
<p>I certify that the statements herein are true, complete and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent statements or claims may be grounds for denying the grant request. I agree to accept responsibility for the scientific conduct of the project, provide the required progress reports, comply with the terms and conditions set out in the Request for Applications and otherwise meet the other requirements specified should a grant be awarded as a result of this application.</p>	
APPLICANT'S SIGNATURE:	Date:
<p><b>UNDERTAKING OF TRAINING SUPERVISOR</b>          If an award is made, I will accept the awardee for research training in my laboratory. Adequate resources will be available to cover the cost of the awardee's research and I agree to contribute \$5,000 per annum towards the total funding amount of the award. I agree to abide by all ethical and safety regulations governing the research associated with this award. I will ensure that all projects will be reviewed by the appropriate review committee(s) prior to their commencement.</p>	
SUPERVISOR'S SIGNATURE:	Date:
PRESIDENT OR AUTHORIZED SIGNING OFFICIAL OF HOST INSTITUTION	
NAME:	Date:
POSITION:	SIGNATURE: