

Certifications

Applicant Name:

Project Title:

Funding Scheme (s):

Applicant

In signing this page, you certify that all details given in this application are true and correct, you meet all eligibility criteria, and your mentor's (if applicable) and head of department support this application.

Name

Department

Signature

Date

Research Administration Office

In signing this page, you certify that this request satisfies the requirements of this Institution, this Institution has established administrative processes for assuring sound scientific practice and that the Institution will cover any funding gaps (e.g., corporate services charges, salary and leave payments).

Name

Department

Signature

Date
