**HRB Host Institution Application Form**

**PLEASE NOTE: The review process following receipt of the application may take between six to eight weeks.**

**Please refer to Section 8 for a copy of the HRB’s Host Institution Policy**

|  |  |
| --- | --- |
| **Name of Applicant Organisation:** |  |
| **Address:** |  |

**SECTION 1 – LEGAL STRUCTURE**

**1.1** What is the legal status of the applicant organisation (tick appropriate box)?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Company limited by guarantee |  |  | Trust |  |
| Voluntary Hospital |  |  | Limited Company |  |
| Partnership |  |  | Sole trader |  |
| Charity |  |  | State Agency |  |
| Higher Education Institution |  |  | Government Department |  |
| Other (provide details) |  |  |  |  |

|  |  |
| --- | --- |
| Companies Registration Office No. (if applicable) |  |
| Charity Registration Number(if applicable) |  |
| Revenue Commissioner CHY No. (if applicable) |  |

Evidence of registration with Charities Regulatory Authority. Please include a print out of the charities register page covering the applicant organisation from <https://www.charitiesregulatoryauthority.ie/>

**1.2** Set out the aims and objectives of the applicant organisation (refer to Memorandum and articles of incorporation, corporate strategy etc.)

|  |
| --- |
|  |

**1.3** Complete the following table in respect of;

* Subscribers of a Company Limited by Guarantee
* Shareholders of a Company Limited by Shares
* Beneficial Owners of the assets/liabilities of the applicant organisation e.g. Department Minister

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Name | Address | Occupation | % ownership/shareholding |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 |  |  |  |  |

(insert more lines if required)

**1.4** Have the assets of the applicant organisation been provided as security for any loan or other benefit?

 Yes No





If the answer to question 1.4 is ‘yes’ then please complete Section 1.5 below.

**1.5** Complete the table below providing full details on; (a) the loan or other benefit secured, (b) whether the applicant or another person/legal entity is the beneficiary of the loan or other benefit, (c) the security holder(s).

The Applicant Organisation must provide written confirmation from each of the security holder(s) that the Grant Monies will never be called upon to satisfy any loan payments or repayment of other benefits of the Applicant Organisation. *(Confirmation should be submitted on the headed note paper of the Security Holder, addressed to the Health Research Board and submitted together with this application)*

|  |  |  |  |
| --- | --- | --- | --- |
| **Details of loan or other benefit secured\***  | **Name of beneficiary of the loan or other benefit** | Name of Security holder(s) on loan or other benefit | Date of letter from security holder to HRB |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

\*(including original value and value on the date of signing this Host Institution application form)

**SECTION 2 – FINANCIAL INFORMATION ON APPLICANT ORGANISATION**

**2.1** Attach a copy of the most recent set of financial statements of the applicant organisation.

2.1(a) Where the financial statements are audited please include the audit opinion.

2.1(b) Where the financial statements are not audited due to exemption please include a certificate from the

 accountant of the entity confirming there have been no amendments to the accounts and attesting to the accuracy of the financial statements.

2.1(c) Please provide a copy of the current tax clearance certificate of the entity or if a charity the revenue letter confirming tax exemption status.

**2.2** Please complete the table below to show the organisation’s total income from research during the past five financial years as per the financial statements of the organisation.

|  | **Year-end date** | **dd mm yyyy****€** | **dd mm yyyy****€** | **dd mm yyyy****€** | **dd mm yyyy****€** | **dd mm yyyy****€** |
| --- | --- | --- | --- | --- | --- | --- |
| 1 | Total Research Income from Irish Government sources (Exchequer/Public funding) |  |  |  |  |  |
| 2 | Total Research Income from Charitable Sources |  |  |  |  |  |
| 3 | Total Other Research Income  |  |  |  |  |  |
|  | **Total Research Income** |  |  |  |  |  |

**2.3** Taking each of the categories above 1 – 3, please outline the sources of research funding received within the last five years in the following format;

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Category** | **Title of award** | **Funding Body** | **Duration of award** | **Amount funded €** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**2.4** Please complete the table below to show the organisation’s total expenditure on research during the past five financial years as per the financial statements of the organisation.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Year-end date** | **dd mm yyyy****€** | **dd mm yyyy****€** | **dd mm yyyy****€** | **dd mm yyyy****€** | **dd mm yyyy****€** |
| Health Related Research Expenditure |  |  |  |  |  |
| Other Research Expenditure |  |  |  |  |  |
| **Total Research Expenditure** |  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Surplus/ (Deficit)** |  |  |  |  |  |

**2.5** Please describe in detail the system(s) and processes in place in the applicant organisation to ensure effective financial management of research awards (please refer to the organisations’ Standard Operating Procedures where applicable) in line with the HRB general terms and conditions.

Please include details such as

* Internal financial controls at grant set up, budget management (including proposed budget changes) and close out,
* financial record keeping processes,
* processes and controls to ensure that the Principal Investigator and the Research Team comply in full with the HRB’s General Terms and Conditions for Research Awards and any special conditions of a grant.

|  |
| --- |
|  |

**SECTION 3 – Research Administration, Support & Governance**

**3.1** Please outline the research vision, mission and objectives of the applicant organisation. Provide a copy of the most recent Research Strategy (or equivalent), if available.

|  |
| --- |
|  |

**3.2** Please describe the resources, supports, infrastructure and systems in place in the applicant organisation to ensure compliance with the HRB General Terms and Conditions. At a minimum, you should include in your description the following:

1. Support and advice for preparation, sign-off and submission of research grant applications;
2. Award contract negotiation and acceptance (including subcontracts);
3. Reporting, certification, monitoring and close-out of awards (including systems in place for engaging with Principal Investigators to ensure compliance with all obligations of the award);
4. Ensuring compliance with all relevant statutory and regulatory requirements e.g. data protection, ethics approval;
5. Effective procurement practices and asset management/maintenance;
6. Procedures for managing Intellectual Property for publically funded research (with reference to the national protocol entitled “Inspiring Partnership- the national IP Protocol 2016: Policies and resources to help industry make good use of public research in Ireland”);
7. Appropriate research governance practices, policies and systems;
8. Supporting effective dissemination and communication from research awards

|  |
| --- |
|  |

**3.3** Can the applicant organisation provide evidence for compliance with section nine “Liability, Indemnity and Insurance” of the HRB general terms and conditions?

 Yes No





If yes, briefly describe below;

|  |
| --- |
|  |

**3.4** Provide details for *each* member of core staff that is engaged in research administration, support & governance, in the following format (excluding staff already listed in question 2.3):

***Examples may include; Personnel involved in approving grant submissions, Contracts, Technology Transfer, Technology platforms, Communications, Ethics etc.***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name | Qualifications | Role within organisation  | Full Time or Part Time | Date of appointment | Date contract ends |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**SECTION 4 – Research Capacity**

As an indicator of the level of activity as a research performing organisation;

**4.1** Please provide details for *each* category of research staff actively involved in conducting health research in the applicant organisation within the last 5 years in the following format:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Type of Researcher** | **Number per Year** *(insert year)* | **Number per Year** *(insert year)* | **Number per Year** *(insert year)* | **Number per Year** *(insert year)* | **Number per Year** *(insert year)* |
| *MSc Student* |  |  |  |  |  |
| *PhD Student* |  |  |  |  |  |
| *Technician* |  |  |  |  |  |
| *Research Assistant* |  |  |  |  |  |
| *Post doctoral scientist* |  |  |  |  |  |
| *Principal Investigator* |  |  |  |  |  |
| *Project Manager* |  |  |  |  |  |
| *Research Nurse* |  |  |  |  |  |
| *Study* *Co-ordinator* |  |  |  |  |  |
| *Statistician* |  |  |  |  |  |
| *Other* |  |  |  |  |  |

*(insert more lines if required)*

**4.2** Outputs and Outcomes from research funding within the last five years:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Year*(insert year)* | Year*(insert year)* | Year*(insert year)* | Year*(insert year)* | Year*(insert year)* |
| Number of higher degrees supported |  |  |  |  |  |
| \*Number of Publications |  |  |  |  |  |
| Other….. |  |  |  |  |  |

*(insert more lines if required)*

***\* Please provide full details of all publications noted above as an appendix to this application***

**4.3** Please describe the resources, supports, infrastructure and systems in place in the applicant organisation to ensure compliance with the HRB General Terms and Conditions in relation to recruitment, training and development (including mentoring and supervision) of research personnel across all career stages and in all relevant aspects of health-related research

|  |
| --- |
|  |

**SECTION 5 – HRB GENERAL TERMS AND CONDITIONS DECLARATION**

**Declaration**

I have read and understand the above requirements and declare that the information provided is true and accurate.

I have read, understand and agree with the HRB General Terms and Conditions

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorised Signatory of the Applicant Organisation

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 6 – ORGANISATION CONTACTS & SIGNATORIES**

|  |
| --- |
| **6.1 Person responsible for authorising the submission of research grant applications (GEMS Pre Award Contact)** |
| Name |  |
| Job title |  |
| E-mail address |  |
| Telephone number |  |

|  |
| --- |
| **6.2 Person responsible for co-ordinating the administration\* of successful awards (GEMS Post Award Contact)****\*** The GEMS Post-award contact will be the HRB contact point for all communication to and from the Host Institution in relation to the following activities:- contracts- payment notifications- progress reports (annual, end-of-grant etc)- variations (requests for change to the grant contract)- ad hoc notifications regarding active grants It is anticipated that the nominated contact in the Applicant Organisation will be responsible for triaging such communications/queries, liaising with the appropriate person(s) within their organisation and coordinating responses. |
| Name |  |
| Job title |  |
| E-mail address |  |
| Telephone number |  |

|  |
| --- |
| **6.3 Person responsible for signing award contracts on behalf of the Applicant Organisation\*\*** |
| Name |  |
| Job title |  |
| E-mail address |  |
| Telephone number |  |
| Sample signature |  |

|  |
| --- |
| **6.4 Person responsible for signing off on award financial reports on behalf of the Applicant Organisation\*\*** |
| Name |  |
| Job title |  |
| E-mail address |  |
| Telephone number |  |
| Sample signature |  |

\*\* The HRB would expect the applicant organisation to demonstrate a segregation of duties between the contract signee and the financial report signee.

|  |
| --- |
| **6.5 Please provide the bank account details of the nominated account of the Applicant Organisation for receipt of funding from the HRB.** |
| Account Name |  |
| Bank Name  |  |
| Bank Address  |  |
| BIC  |  |
| IBAN  |  |

**SECTION 7: CHECKLIST OF ACCOMPANYING DOCUMENTS**

|  |  |  |  |
| --- | --- | --- | --- |
| **No** | **Description of Document Required** | **Section of application form referring to document** | **Tick if included in application** |
|  | Evidence of the legal status e.g. Certificate of Incorporation, copy of memorandum and articles of association, or legislation establishing the institution | Section 1.1 |  |
| 2. | Letter from security holder if applicable | Section 1.5 |  |
| 4. | Audit opinion or Accountant Certification | Section 2.1 |  |
| 5. | Tax Clearance Cert or Revenue Commissioner Letter | Section 2.1 |  |
| 6. | Research Strategy  | Section 3.1 |  |

**SECTION 8: HRB Host Institution Policy**

**HRB Host Institution Policy**

***Effective from 01 July 2015***

The policy of the Health Research Board is that an approved Host Institution for the purpose of administering HRB research awards must be a legal entity which fulfils the responsibilities of “Host Institution” as set out in the [HRB General Terms and Conditions](http://www.hrb.ie/research-strategy-funding/grant-holder-information/grant-conditions/) for research awards.

The current list of research performing organisations that are HRB Host Institutions is located on our website at the link below;

<http://www.hrb.ie/research-strategy-funding/policies-guidelines-and-grant-conditions/policies-and-position-statements/approval-of-host-institutions/>

Research performing organisations seeking HRB Host Institution Status must satisfy all of the following conditions:

1. The organisation must be a legal entity
2. The organisation must demonstrate financial soundness
3. The organisation must warrant that it can comply in full with the HRB General Terms and Conditions
4. The organisation must be able to demonstrate a capability to manage heath related research awards and possess an existing in-house capacity to carry out research that materially extends and enhances the Irish research base.
5. The organisation must be based in the Republic of Ireland (funding outside of Ireland may be allowable where there is no established research capacity in Ireland (e.g. for the case of rare diseases).

All organisations wishing to apply should complete the “HRB Host Institution Application Form” as set out below and return the completed form to Hostinstitutions@hrb.ie

Following submission of the HRB Host Institution Application Form, staff at the HRB will assess if the organisation meets the criteria set out in the Policy. Please note this process may take between six to eight weeks.

Once HRB Host Institution status has been granted, it will last for a period of 5 years. The approval status of Host Institutions may be the subject of periodic review. If the status of a Host Institution changes during this period the Host Institutions eligibility to apply to our schemes will require re-consideration.

If an application is unsuccessful, HRB will provide feedback and an opportunity to re-apply will be available.