
 Dr Vineeth Rajkumar

 Rosetrees Trust

# Section 1 - Applicant Details

## PRIMARY APPLICANT DETAILS

Title	Dr
Name	Vineeth
Surname	Rajkumar
Organisation	Rosetrees Trust
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Address	Rosetrees Trust
	Russell House
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	Edgware
	HA8 7LW
	United Kingdom of Great Britain and Northern
	Ireland (the)

## GMS ORGANISATION

Type	Charity/ trusts
Name	Rosetrees Trust
Phone (Work)	02089512588
Email (Work)	info@rosetreestrust.co.uk
Address	Russell House
	140 High Street
	Edgware
	Middlesex
	HA8 7LW
	Great Britain

## Principal Applicant CV Upload

Upload CV of the principal applicant (no more than 3 pages) including up to the 5 most recent publications, up to the 5 additional most relevant publications and any currently active grants, indicating your role as PI or Col. Any publications that are particularly relevant to the current application should be highlighted in bold with a 1-2 line summary describing the relevance of the publication to the current application.

No Response

## Are there co-applicants associated with the grant?

- ☐ Yes
- ☐ No

**Are there collaborators associated with the grant?**

- ☐ Yes  
☐ No

## Section 2 - Details of Current Fellowship

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**Details of your Current Fellowship**

Provide the required information regarding your current fellowship

**Fellowship Title**

*No Response*

**Amount Awarded for Current Fellowship**

*No Response*

**Fellowship Funding Body**

*No Response*

**Fellowship Grant Reference Number**

*No Response*

**Fellowship Start Date**

*No Response*

**Fellowship End Date**

*No Response*

**Abstract of your Current Fellowship**

Provide the abstract you submitted with your fellowship application. If the original abstract exceeds 400 words, please shorten it to fit within this limit.

*No Response*

## Section 3 - Rosetrees Translational Award-Project Details

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**Lay Project Title**

*No Response*

**What is the research question?**

The aim of Rosetrees Translational Awards is to enable translational research that will address an unmet clinical need. Please state the clinical research question you are addressing using the PICO framework. Refer to the application instructions for further guidance.

*No Response*

**Simple Project Summary**

Describe your project in simple English so that it is accessible to a lay audience. This summary may be used on the Rosetrees website and at trustees meetings so please keep this description simple and jargon-free.

*No Response*

**Scientific Summary**

Provide a scientific summary of your proposed project including the background, the unmet clinical need, the proposed solution, key objectives and outline research plan.

*No Response*

### **Specific and distinct objectives of your Rosetrees Translational Award proposal**

The Rosetrees Translational Award is designed to help fellowship holders progress a specific aspect of their fellowship research toward patient benefit. Please state the specific objectives of your Rosetrees Translational proposal and what you expect to accomplish after two years of Rosetrees funding. It's crucial to explain how this award will build upon your current fellowship and introduce new goals that are not already addressed by your existing fellowship.

*No Response*

### **Translational Readiness Level**

Rosetrees Translational Awards are intended to increase the translational readiness level (TRL) of your research. Describe how the Rosetrees Translational Award will increase the TRL of your research, making clear the current TRL status of your research and the TRL status after 2 years of Rosetrees funding. Refer to the application instructions for further guidance.

*No Response*

### **Milestones & Deliverables**

Clearly and concisely state six-monthly milestones and deliverables against which we can assess your progress.

*No Response*

### **Gantt Chart**

Please upload an accompanying Gantt chart depicting your project timescales.

*No Response*

### **Why is this research important?**

Explain why this research is important and why should it be carried out now?

*No Response*

### **How will this research ultimately benefit patients?**

Provide a clear explanation on which group of patients will benefit from this research and how they will benefit.

*No Response*

### **Research Team and Track Record**

Explain why you and your team are the best people to carry out this research.

*No Response*

### **Institutional Letter of Support**

Upload a letter of support from your host institution, signed by your head of department detailing any support that will be provided by the host institution if your application to Rosetrees is successful.

*No Response*

## Clinical Areas of Research

Which clinical areas will your research benefit? Check the appropriate boxes below.

- ☐ Treatment
- ☐ Prevention
- ☐ Diagnosis
- ☐ Screening
- ☐ Quality of Life
- ☐ Epidemiology
- ☐ Rehabilitation
- ☐ Monitoring of Disease
- ☐ Mechanisms of Disease
- ☐ Other Area of Research

## Areas of Research

Which categories below best describe your area of research? Check the appropriate box(es) below.

- ☐ Artificial Intelligence/Machine Learning
- ☐ Bioinformatics
- ☐ Cell Therapy
- ☐ Disease Biomarkers
- ☐ Drug Development
- ☐ Gene Therapy
- ☐ Genetics
- ☐ Imaging
- ☐ Lifestyle Intervention
- ☐ Medical Technology/Devices
- ☐ Software Development
- ☐ Surgery
- ☐ Tissue Engineering
- ☐ Wet Laboratory Research
- ☐ Vaccine Development
- ☐ Other

## Disease Categories

Which of the following categories best summarise the disease/s that your work will be focused on.

Select all that apply.

- ☐ Antimicrobial Resistance
- ☐ Blood
- ☐ Cancer
- ☐ Cancer - Bladder
- ☐ Cancer - Blood
- ☐ Cancer - Bone
- ☐ Cancer - Bowel
- ☐ Cancer - Brain
- ☐ Cancer - Breast
- ☐ Cancer - Childhood

- ☐ Cancer - Head & Neck
- ☐ Cancer - Kidney
- ☐ Cancer - Liver
- ☐ Cancer - Lung
- ☐ Cancer - Oesophagus
- ☐ Cancer - Ovarian
- ☐ Cancer - Pancreatic
- ☐ Cancer - Prostate
- ☐ Cancer - Skin
- ☐ Cancer - Spine
- ☐ Cancer - Stomach
- ☐ Cardiovascular
- ☐ Congenital
- ☐ Dementia
- ☐ Otology
- ☐ Ophthalmology
- ☐ Gastrointestinal
- ☐ Immunity
- ☐ Infection
- ☐ Inflammatory
- ☐ Mental Health
- ☐ Metabolic
- ☐ Motor Neuron Disease
- ☐ Musculoskeletal
- ☐ Neurological
- ☐ Nutrition
- ☐ Parkinson's Disease
- ☐ Physiotherapy
- ☐ Renal and Urinary
- ☐ Reproduction
- ☐ Respiratory
- ☐ Skin
- ☐ Stem Cell Therapy
- ☐ Stroke
- ☐ Vaccines
- ☐ Other Condition

### Project Hours

Please specify the number of hours per week that will be spent on the project by each member of the research team (including PDRAs, technicians and students).

*No Response*

### Case for Support

Upload a detailed case for support for the purpose of external peer review (**maximum of 3 pages, font size 11, including any figures and appendices. References can go onto one additional page**). The report should be focussed on providing a detailed methodology of the proposed research and preliminary data that supports the proposal. You should also include a clear strategy to mitigate high-risk aspects of the project.

No Response

## Project Details

### Date of Project

#### Project Start Date

No Response

#### Project End Date

No Response

### Number of People Affected by the Disease in

#### The UK

No Response

#### Worldwide

No Response

### Does your project include procedures to be carried out on animals in the UK under the Animals (Scientific Procedures) Act?

- ☐ No animals being used  
☐ Animals are being used

### Human Participants

Does your project involve human participants or use of human biological material?

- ☐ Yes  
☐ No

## Section 4 - Financial Details

- Translational awards are for a maximum of £150,000 over 2 years. The maximum amount that can be requested for any year is £75,000.
- The budget table defaults to a split for one salary. If requesting this please hit the 'Edit Item' icon next to the 'Base Salary' label, in front of this add the title and grade for the post the salary is for, and click 'Save'. Then fill in the base salary, NI, pension and London weighting if applicable for that salary.
- If more than one salary needs requesting then please add additional rows replicating the default split, for the additional salary. To do this, click the 'Add A New Item' button at the bottom of the table, choose the 'Salary Type' then type in the title and grade of the post in front of the 'Base Salary' label and click 'Add'. Repeat this process to add the other 3 salary cost lines for NI, pension and London weighting if applicable.
- Please provide itemised details of any consumables, animal costs or other associated costs. To add details in the Consumables, Animal Costs and Other Costs sections, firstly hit the 'Edit Item' icon next to the label 'Please Specify' and type in the name of the cost and click 'Save'. To add further lines of costs, click the 'Add A New Item' button at the bottom of the table, choose the cost 'Type' then type in the name of the cost and click 'Add'.
- If your grant is for more than one year, please hit 'Add another period group' to add funding details for a second year.
- Further justification of the listed costs being requested should be described in the question underneath the budget table.

**Applications with insufficient itemised detail and justification will be rejected.**

Budget items	Year 1	Total
<b>Salary</b>		
Base Salary	£0.00	£0.00
NI	£0.00	£0.00
Pension Contribution	£0.00	£0.00
London Weighting	£0.00	£0.00
<b>Salary Total</b>	<b>£0.00</b>	<b>£0.00</b>
<b>Consumables</b>		
Please Specify	£0.00	£0.00
<b>Consumables Total</b>	<b>£0.00</b>	<b>£0.00</b>
<b>Animal Costs</b>		
Please Specify	£0.00	£0.00
<b>Animal Costs Total</b>	<b>£0.00</b>	<b>£0.00</b>
<b>Other Costs</b>		
Please Specify	£0.00	£0.00
<b>Other Costs Total</b>	<b>£0.00</b>	<b>£0.00</b>
<b>Grand Total</b>	<b>£0.00</b>	<b>£0.00</b>

### Justification of Costs

Provide a justification of *all* costs listed in the financial costings table above. **Applications with insufficient information will be rejected.**

*No Response*

## Section 5 - Future Plans / Project Impact

### Translational Strategy

Outline your translational strategy to further develop your research towards the clinic. You can include information on future grant applications and potential routes to commercialisation.

*No Response*

### Patient & Public Involvement

Provide details of any patient and public involvement (PPI) that has helped shape your research proposal.

*No Response*

### Additional Relevant Information

Provide any additional information you feel is relevant to your application.

*No Response*

## Section 6 - Submission

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**In order for the lead applicant to submit the completed application, all invited co-applicants and collaborators must log in and click the 'Finish Contribution' button. Please confirm that all participants have finished their contribution.**

**If there are no co-applicants or collaborators associated with your application, then please hit N/A.**

The submit button will only become visible once the status for all participants on the 'Participants' tab shows as 'Complete'. This happens when each participant hits their 'Finish Contribution' button when checking your online submission.

☐ Yes

☐ N/A