# Eligibility

\* indicates a required field

#### Ramaciotti Award Guidelines 2024

I confirm that I have read and understood the guidelines above prior to completing this form \*  $\hfill \sim$ 

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I consent to the information provided being shared with the Ramaciotti Foundations' Scientific Advisory Committee \*  $_{\bigcirc}$ 

### Nominated Recipient Details

#### \* indicates a required field

#### **1. Nominated Recipient details**

**Statement of Declaration** (to be completed by the Nominated Recipient and attached after Question 6).

Name *	Title	First Name	Last Name	
Current Appointment *				
Department *				
Organisation Name *	Organisat	ion Name		
ABN *				
	The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.			
Information from the Australian Business Register				
	ABN			
	Entity nan	ne		
	ABN statu	S		
	Entity type	e		

	Goods & Services Tax (GST)			
	DGR Endorsed			
	ATO Charity Type	More information		
	ACNC Registration			
	Tax Concessions			
	Main business location			
	Must be an ABN.			
Postal Address *	Address			
	Address Line 1, Suburb/Town, State/Province, Postcode, and			
	Country are required.			
Phone Number *				
	Must be an Australian phone number.			
Email Address *				
	Must be an email address.			
	Huse be an email address.			

### **Nominator Details**

\* indicates a required field

### 2. Lead Nominator Details

NB: all correspondence in relation to this grant will be sent to the lead nominator

Name *	Title	First Name	Last Name	
Current Appointment *				
Department *				
Organisation Name *				
Location *	Address			

State/Province and Country are required.

# 2024 Ramaciotti Medal for Excellence Nomination Form Preview

Phone Number *	Must be an A	ustralian phone number.		
Email Address *	Must be an email address.			
3. Nominator Details 2				
Name	Title	First Name	Last Nam	1e
Current Appointment				
Department				
Organisation Name				
Phone Number	Must be an A	ustralian phone number		
Email Address				
4. Nominator Details 3				
Name	Title	First Name	Last Nam	10
Current Appointment				
Department				
Organisation Name				
Phone Number	Must be an A	ustralian phone number		
Email Address				

## Ramaciotti Support

* indicates a required field	
5. Has the Nominated Recipient received previous Ramaciotti	Word count:
support, if so please include the year of funding and the project information	Must be no more than 50 words. This question is not mandatory
6. Provide a citation outlining the background to and consequences of the nominated recipient's discovery (or discoveries) and their recent scientific	Word count:
achievements *	Must be no more than 2500 words
Attach Curriculum Vitae *	Attach a file: CV should be no more than two (2) pages. Note a list of publications can be included as part of CV but total pages should not exceed four (4)
Attach List of Publications	Attach a file:
	List of publications should be no more than two (2) pages
Attach Statement of Declaration *	Attach a file:
	The statement of declaration is available for download at the beginning of this form under Nominated Recipient Details

### Declaration

#### \* indicates a required field

### To be completed by the lead nominator or person submitting the nomination

I certify that:

(a) I have read and understood the guidelines and conditions relating to the Ramaciotti Awards

(b) the information provided in this nomination is accurate, true and correct at the time of completion

(c) I am authorised to submit the nomination on behalf of the nominated recipient

I understand and agree with the statements above

Trustee companies such as Perpetual Trustee Company Limited ("Perpetual") are regulated by the Commonwealth Corporations Act and supervised by the Australian Securities and Investments Commission. As a result, Perpetual is required to disclose certain information to our clients (such as beneficiaries of charitable trusts) about our services in a Financial Services Guide (FSG).

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○ I/we agree to the delivery of certain disclosure documents such as a FSG electronically including via electronic mail or via Perpetual's website.

You may request a hardcopy of such disclosure documents at any time by contacting us directly or via or website at <u>www.perpetual.com.au</u>

Perpetual is committed to protecting your privacy and safeguarding your personal information. To view Perpetual's Privacy Policy please visit <u>www.perpetual.com.au/Privacy-Policy</u>

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O I/we give permission for Perpetual to provide all documents electronically including via email & understand that Perpetual will not accept any responsibility or liability for any unauthorised access or interference after transmission, or for any delay or non-delivery of any document

### Certification

#### Your Name \*

Title	First Name	Last Name	
Current A	ppointment *		