# BMSF Project Registration Form v6-12-22



1. Project Title (no more than 20 words)

## 2. Project main aims and hypotheses to be tested in the work at BMSF

#### 3. Supervisor Details

| Title:       | First name: |            | Last name: |
|--------------|-------------|------------|------------|
| Institution: |             | Department | t:         |
| Work Phone:  |             | Work Fax:  |            |
| Email:       |             | Mobile:    |            |

### 4. All Participating Researchers

| Title | First Name | Last Name | Email |
|-------|------------|-----------|-------|
|       |            |           |       |
|       |            |           |       |
|       |            |           |       |
|       |            |           |       |

### 5. BMSF Lead Staff member (first) and other BMSF staff assisting

| Title | First Name | Last Name | Email |
|-------|------------|-----------|-------|
|       |            |           |       |
|       |            |           |       |
|       |            |           |       |
|       |            |           |       |



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## 6. BMSF Contribution to method development and training (please tick 1 box and add details)

A. Project methods exist within the BMSF or elsewhere and little development is needed to collect data

B. Project methods exist within literature & examples available to allow setup within the BMSF

C. Project methods need to be developed with few or no literature examples to follow.

Project setup costs, include consideration of sample preparation, training, expected mass spectrometry, who will run the samples and data analysis, are to be estimated and source of funding provided:

If A ticked method development is likely small but provide details on existing methods that are to be used within the BMSF.

If B ticked provide example publications to be followed. Also provide details and an estimate of time required for setup of methods within the BMSF below.

If C ticked, then write a brief account of the scope of the project including the BMSF contribution. *In cases* where funding is limited BMSF and/or MWAC may provide support. Please discuss with BMSF Director, MWAC Director and submit proposal for consideration: <u>https://forms.office.com/r/ZyunRrB9YG</u>

## Project method and protocol details.

7. Are access fees to be paid from one or more UNSW accounts?

No (skip to 9)

Yes (continue to 8)

#### 8. UNSW Account Information

| Fund Code | Dept ID | Project Code | % |
|-----------|---------|--------------|---|
|           |         |              |   |
|           |         |              |   |



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## 9. Contact for external invoicing only NB: a 10% GST charge applies to all external invoices.

| Name:               |  |
|---------------------|--|
| Email:              |  |
| Billing Address:    |  |
|                     |  |
|                     |  |
|                     |  |
|                     |  |
| ABN (if applicable) |  |

**10. Ethics Approval –** If samples originate from Human or Animal sources, please provide details of Ethics approval

| Origin             | Details of Ethics Approval (Organisation and approval number) |  |
|--------------------|---|--|
| Human              |   |  |
| Animal             |   |  |
| No approval needed |   |  |

#### 11. Access Fees (\$/hr)

| UNSW DIY \$30      | Details: |
|--------------------|----------|
| UNSW FFS \$60      |          |
| Non-UNSW DIY \$90  |          |
| Non-UNSW FFS \$180 |          |
| Commercial         |          |
| Other:             |          |

**12.** Samples remain the property of the researcher submitting them and may only be analysed as described above and within existing Ethics Approval. Plans for further analytical work within the BMSF must be documented through submission of a written project extension and with confirmation this new work is within the existing approved Ethics guidelines. Samples will be disposed of after analysis, unless other instructions are received.

13. Approval – Applicant/s to download the completed form and

to supervisor for approval

| SUPERVISOR USE ONL | Y |
|--------------------|---|
|--------------------|---|

### hereby approve this project registration form and

I,

## confirm my agreement to the following conditions:

- An appropriate acknowledgment of the involvement of the BMSF will appear in any publication involving work in the BMSF (see BMSF website for details).
- In some publications co-authorship by BMSF staff may be justified. The requirements for contributions worthy of authorship are given in the relevant UNSW procedure: UNSW Authorship and Resolving Disputes between Authors Procedure <a href="https://www.gs.unsw.edu.au/policy/documents/researchauthorproc.pdf">https://www.gs.unsw.edu.au/policy/documents/researchauthorproc.pdf</a>
- A copy (or full citation details) of any publication involving work in the BMSF will be sent to the Director of the BMSF as soon as possible after acceptance.

## 14. BMSF project registration number (BMSF admin to fill in):

