







Active Pharmaceutical Ingredient Cluster Programme

PROPOSAL TEMPLATE

SECTION 1: Summary Proposal Information

Project Title	
Requested Funding	
Intended Start	
Intended Duration	
Applicant	
Title First Name	
Surname	
ID Number	
Organization	
Organization Address	
E-mail Address	
Telephone Number	
Gender	Male / Female
Ethnic Group	African / Coloured / Indian / White / Other (please specify)

SECTION 2: Scientific Details

2.1 Summary

(What is the project goal)

2.2 Applicants experience

2.3 Detailed Research Plan

2.3.1 Goals, objectives, activities and methodology

What API is being developed?

What is unique about your approach? How will it improve the manufacturing process?

How will it provide a competitive advantage for manufacture in SA.?

How will success be measured?

Who will do the work? Level of skill/experience.

Time to completion

2.3.2 Intellectual Property (IP)

What is the IP around the molecule in question?

Who will own the IP when completed?

2.3.3 Progress monitoring

How will progress be measured?

What Milestones are going to be used? - purity, scale etc, cost reduction?

2.4 Available Infrastructure

(Does the laboratory have the infrastructure to conduct the project).

2.5 Expected Outputs, Outcomes and Impact

(Please include any potential IP or solutions that may result from the project as well as benefits that may accrue to South Africa)

SECTION 3: Budget

3.1 Summary Budget

Budget Item	Year 1	Year 2
Personnel Costs		
Laboratory Costs		
Travel Costs		
Other Direct Costs		
Equipment / Capital Costs		
Total Direct Costs		
Overheads		
Total Annual Costs		
Total Project Budget		

3.2 Budget Motivation

3.3 Funds Requested and/or Received

(Please provide details of any other funding applied for)

SECTION 4: Certification by Applicant and Organization

I herewith declare that to the best of my knowledge

- the work outlined in this proposal is my own original work and that the inputs, contributions and the work of others have been appropriately acknowledged where relevant:
- all co-investigators and collaborators listed in the proposal are aware of this proposal and have agreed to their inclusion herein;
- I have undertaken due diligence to ensure that the work proposed has not been done elsewhere in a manner identical to or having an identical process and outcome as that which I propose to do;
- I have permission from the Department/Division/Directorate/Faculty to undertake the proposed work within the precincts of said entity and will have access to all required facilities and other forms of support;
- the work will be undertaken strictly according to accepted ethical and professional research practice, within the provisions and regulations of my host institution and any other applicable national or international prescriptions;
- the information provided in this proposal is true, correct and accurate and I understand and accept that the TIA API Cluster reserves the right to cancel any grant awarded on the basis of false or inaccurate information.

I accept that the TIA API Cluster	reserves the	right to reject	incomplete,	inappropriate or
inadequate proposals/applications	; .			

Full name (print)	
SignatureDate	

Institutional approval

This is to certify that this research proposal (tick applicable box)

			Reference no., date or comment
Has been approved by the applicable research committee or authorized structure	YES	NO	
Is hereby approved for submission to the TIA API Cluster for funding	YES	NO	
Name of authorizing official			
Designation of authorizing official			
Signature of authorizing official			
Date of authorization			