Industry Fellowship Program

Australian Research Council

*[Date]*

To whom it may concern

Re: Letter of Industry Partner Certification *[application RMS ID and title MUST be included]*

*[A brief profile of the Industry Partner]*

*[Details regarding how the project aligns with Industry Partner’s strategic objectives]*

*[Industry Partner’s expectations about industry outcomes, products and/or market value, where relevant]*

*[Details/information of the Cash and/or In-Kind Contributions from the Industry Partner for the project]*

*ALL certification text below is mandatory and must not be amended*

I certify that *[Industry Partner name]* will meet the requirements for Key Industry Partner as outlined in the Industry Fellowship Program (IFP) Grant Guidelines (2024 edition) and a standard ARC grant agreement*,* including the requirement to enter into arrangements regarding Intellectual Property which do not unreasonably prevent or delay academic outputs.

I declare (subject to this application being successful) that *[Industry Partner name]* will support and actively participate in the proposed project.

I declare that *[Industry Partner name]* will contribute (subject to this application being successful) the staff, funds and other resources indicated in the application and has obtained, or will obtain, the necessary authorisations to do so.

|  |  |
| --- | --- |
| Total In-Kind Contribution ($) | Total Cash Contribution ($) |
| $ | $ |

I certify that no part of *[Industry Partner name]*’s Cash Contribution is drawn from funds previously appropriated or awarded from Commonwealth or Australian State or Territory Government sources for the purposes of research, nor from funds previously used to leverage government research or research infrastructure funding. *[This certification is not required if a Cash Contribution is not being made].*

I declare that *[Industry Partner name]* is solvent at the time of submission of this application.

I declare the information contained in this application that relates to our organisation together with any statement provided, is to the best of my knowledge, true, accurate and complete. I also understand the giving of false or misleading information is a serious offence.

I declare I am authorised to sign and submit this declaration on behalf of *[Industry Partner name].*

I certify that *[Industry Partner name]* will ensure that the Fellow is supported to spend time working in an Industry setting as well as in the Administering Organisation. We will provide appropriate facilities for project-related activities.

By signing below, I agree to the above declaration and confirm all the above statements to be true.

|  |  |
| --- | --- |
| Industry Partner (organisation name): | |
| Partner ACN/ACNC/ABN (if applicable): *Ensure the details written here match those used in the application* | |
| Authorised representative (signature): | |
| Position/role: | |
| Phone: | Email: |
| Date: | |