# 🔗 Dr Vineeth Rajkumar

🗓 Rosetrees Trust

# **Section 1 - Applicant Details**

## **PRIMARY APPLICANT DETAILS**

Title	Dr	
Name	Vineeth	
Surname	Rajkumar	
Organisation	Rosetrees Trust	
Website (Work)	www.rosetreestrust.org.uk	
Tel (Work)	0208 951 2582	
Email (Work)	vrajkumar@rosetrees.org.uk	
Address	Rosetrees Trust	
	Russell House	
	140 High Street	
	Edgware	
	HA8 7LW	
United Kingdom of Great Britain and Northern		
	Ireland (the)	

## **GMS ORGANISATION**

Туре	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

### **Co-Principal Applicants CV Upload**

Please upload CVs of both principal applicants (**no more than 2 pages**) including 5 most recent publications, 5 additional most relevant publications and current grants indicating your role as PI or Col.

No Response

### **Institutional Letter of Support**

Please attach a letter of support jointly signed by both faculty heads of the clinical and non-clinical areas, outlining how this application was selected by the university.

No Response

# **Section 2 - Project Details**

## **Project Title**

No Response

## **Scientific Abstract**

Please provide a scientific abstract of your proposed project. The abstract should cover the areas below:

- Background.
- Unmet clinical need.
- Proposed solution-including interdisciplinary nature of the application and how the research is innovative and original.
- Primary aims and objectives.
- Brief description of the methodology including potential pitfalls and mitigation.
- Potential impact of the project.

No Response

### **Supporting Data**

Please upload an additional document with preliminary data that supports your application. **Maximum of 1** page of A4, font size 11.

#### No Response

### **Clinical Area of Research**

Which of the following areas best describes your research?

Please select all that apply.

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

#### **Research Area**

- Artificial Intelligence/Machine Learning
- □ Bioinformatics
- Cell Therapy
- Disease Biomarkers
- Drug Development
- Gene Therapy

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- □ Genetics
- □ Imaging
- Lifestyle Intervention
- □ Medical Technology/Devices
- □ Surgery
- □ Tissue Engineering
- □ Vaccine Development
- U Wet Laboratory Research
- □ Other

## **Disease Categories**

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

Please 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
- Gastrointestinal
- □ Immunity
- Infection
- □ Inflammatory
- Mental Health
- □ Metabolic
- □ Motor Neurone Disease
- □ Musculoskeletal
- □ Neurological

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- □ Nutrition
- □ Ophthalmology
- □ Otology
- Parkinson's Disease
- □ Physiotherapy
- Renal and Urinary
- Reproductive Health
- Respiratory
- 🗆 Skin
- Stem Cell Therapy
- Stroke
- Other Condition

# **Research Team and Track Record**

Outline how the research team involved in the proposal has the appropriate track record, expertise and experience to carry out the research.

No Response

# Lay Title

No Response

# Lay Summary

Please 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

# **Section 4 - Reviewers**

## Please nominate three potential independent peer reviewers who must;

- not be affiliated to this project
- not work at your institution
- not be a current collaborator or co-author on a paper or grant published / awarded within the last 5 years
- be a specialist who can review this project.

## These reviewers will only be contacted should you be invited to make a full application.

Please provide name, e-mail address and institution for each.

Name	E-Mail address	Institution
No Response	No Response	No Response
No Response	No Response	No Response
No Response	No Response	No Response

## **Reviewers Not To Contact**

In addition to contacting your nominated reviewers, we will also select experts in the field independently to review your proposal. If there are any people you would prefer us not to contact for this purpose then please let us know their name and institution below.

No Response

# **Section 5 - Submission**

# In order for the lead applicant to submit the completed application, the invited co-principal applicant must log in and click the 'Finish Contribution' button. Please confirm that the co-principal applicant has finished their contribution.

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

O Yes