

S.K. YEE MEDICAL FOUNDATION

Guidelines for Applicants

1. Background

S.K. Yee Medical Foundation is a charitable trust which was established by the late General S.K. Yee in November 1983. The Trustees who oversee the Foundation ensure the effective implementation of the Objects of the Foundation.

2. Objects

The objects of the Foundation are:

- 2.1 To establish medical services for the poor and sick and provide equipment and apparatus for such services;
- 2.2 To provide medical education;
- 2.3 To acquire and/or construct maintain and/or alter any buildings or works necessary or convenient for the above-mentioned objects or any of them;
- 2.4 To assist, promote, establish, contribute, manage, control or support any charitable institutions or associations providing medical services for the poor and sick.

3. Project Support

From 1997 onwards, applications are invited from registered institutions and associations for support of projects which meet any of the objects. The support will normally take the form of grants. The applications will be considered by the Trustees on a case-by-case basis once a year.

4. Criteria Used For Determining Priorities In Allocation Of Support

Each application for support is considered on a case-by-case basis according to individual merit. The criteria taken into account by the Trustees in determining priorities include :

- project plan(s), its feasibility and how it is of direct benefit to the poor and sick
- uniqueness of the project
- the track record of the institution or association and the relevant experience and professional expertise of project participants
- recommendations obtained from professionals acting as independent referees
- likelihood that the project participants will be able to attain stipulated goals to benefit the poor and sick, and the general community
- the degree of urgency and need for improvement in the health of the poor and sick in the specific project area
- availability of, and potential for, supporting funds and resources from other sources in the same project area
- plans for collaboration among institutions, if appropriate
- cost-effectiveness of the project
- contribution to academic/professional development and knowledge

The above list is not exhaustive and the Trustees may make appropriate adjustments to the above criteria as is seen fit and applicable.

5. **Important Notice**

All applications must be made on the full understanding that the Trustees are entitled in their absolute discretion to reject any application. The Foundation will not provide explanations for unsuccessful applications.

6. **Eligibility To Apply**

Registered institutions and associations eligible to apply to the Foundation for a donation or grant are:

- those managing, providing or intending to establish medical services for the poor and sick;
- those providing medical education; and
- charitable organizations providing medical services.

Notes: 1. Medical includes dental and medical social work.
2. Research projects which will benefit the poor and sick will be considered.
3. Projects normally funded by The Research Grants Council of Hong Kong, health research funds administered under the purview of the Research Office of the Food and Health Bureau and AIDS Trust Fund will not be considered.

7. **Allocation Of Support**

7.1 **Applications**

Applications for support such as donations or grants are invited from relevant registered institutions and associations each year. Project proposals received are categorized according to the following principal usage for consideration by the Trustees:

7.1.1 **Establishment of medical services for the poor and sick and the provision of equipment and apparatus for such services**

The purpose of this category of funding is to enable registered institutions and associations to manage or to establish and manage medical services for the poor and sick. This may primarily include the acquisition of equipment and apparatus for such services, acquisition of land and buildings, funds for administration and operation such as recruitment and training of staff.

7.1.2 **Provision of medical education**

The purpose of this category of funding is to enable registered institutions or associations providing or intending to provide medical education to do so for the eventual benefit of the poor and sick. This extends beyond the annual donations in the form of medical scholarships to students currently made to The University of Hong Kong, The Chinese University of Hong Kong and The Hong Kong Polytechnic University.

7.1.3 **Acquisition and/or construction maintenance and/or alteration of any buildings or works relevant to the provision of medical services or medical education**

The purpose of this category of funding is to acquire, construct, maintain and/or alter any buildings or works necessary or convenient for the establishment of medical services for the poor and sick and medical education, including the provision of equipment and apparatus.

7.1.4 Assistance in support of charitable organizations providing medical services for the poor and sick

The purpose of this category of funding is to assist, promote, establish, contribute, manage, control or support any charitable organization providing medical services for the poor and sick.

7.2 Processing

7.2.1 Upon receipt of the application, an acknowledgement will be sent to the project leader and copied to the institution or association concerned and the overseeing organization, if any. A project number will be assigned to each application and should be quoted in all future communication with the Foundation relating to the project.

7.2.2 Registered institutions and associations may be requested to provide additional information, and senior management, project leader, and/or team members may be invited to attend interviews or presentation sessions to assist referees and the Trustees in their consideration of the project proposal. The Trustees may seek independent expert opinion at their discretion to assist in decision making as it deems fit.

7.3 Selection by Trustees

Whilst the Trustees will consider each application carefully, the Trustees reserve the right to refuse assistance in whole or in part for any reason whatsoever nor will the Trustees provide any reason for refusal.

7.4 Notification

Applicants will be notified of their application results in writing once a decision is made by the Trustees.

7.5 Encouragement of co-operation

In order to maximize cost-effectiveness of donations or grants and to minimize wastage from duplication of resources, different registered institutions or associations submitting identical or largely similar proposals will be encouraged to collaborate and co-operate, and submit joint applications, with one of the registered institutions or associations being the principal applicant and the other parties being the co-applicant(s). The Foundation will communicate directly with the principal applicant via the overseeing organization, if any, in matters relating to the project and the principal applicant is obliged to convey the contents of such communication to co-applicants promptly.

7.6 Ethics

Applicants are expected to use their utmost good faith and abide by their professional ethics in their dealings with the Foundation. The Foundation reserves the right to take such action as it sees fit against applicants for fraudulent practices or malpractices in connection with their applications or conduct of the project concerned, or for misappropriation of allocated resources. Such action may include complaints to the relevant institution or professional body for misconduct as well as legal action for the refund of donations or grants received or spent on the project concerned to the Foundation.

S.K. Yee Medical Foundation

Application Form for Funding of Project

Notes :

Project No. _____

1. Please read the Guidelines for Applicants carefully before completing this application form.
2. Sections A and B should be completed by the project leader and Section C should be completed by the Head or authorized representative of organization / overseeing organization.
3. All sections of this form must be completed in English in standard size typescript using the space provided. Additional sheets other than those required in Section B7 may not be attached and will be returned.
4. Completed forms should be sent to Unit 1708, Office Tower, Convention Plaza, 1 Harbour Road, Wan Chai, Hong Kong.

Section A Summary Of Project Proposal (To be completed by the Project Leader)

1. Project Title

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2. Project Participants (Please attach brief curriculum vitae of all project participants)

Project Leader

Name: _____ Post: _____

Department: _____

Organization: _____

Address: _____

Tel. No.: _____ Fax No./E-mail Address: _____

Team Members

Name	Post	Department/Organization	Tel. No.

3. Project Type and Duration (Please tick the appropriate boxes)

New Project Extension to On-going Project

Duration of project :

less than one year one to two years two to three years over three years

Planned starting date	Expected completion date	Duration (in months)

4. Donation Or Grant Applied For (Please also give a detailed breakdown in Section B3)

a. Apparatus and equipment	\$
b. Salary	\$
c. General expenses	\$
d. Capital costs	\$
e. Others (please specify) _____	\$

Total cost of project: \$

Less: Funds secured from other sources \$

Amount of donation or grant applied for: \$

5. Project Summary

(The information should be concise and comprehensible to a non-specialist, and should not exceed the given space.)

a. Ways in which the project is of direct benefit to the poor and sick:

b. Aims:

c. Implementation plans and work schedule:

d. Justification of requirements and purpose:

e. Potential for implementation of results:

f. Sustainability of the project:

6. Statement Of Relevant Past Experience And Reasons Why Funding Should Be Granted

(Please provide a half-a-page statement on the relevant past experience of project participants and give reasons why funding should be granted. The statement should be concise and comprehensible to a non-specialist, and should not exceed 200 words.)

Section B Details Of The Project Proposal (To be completed by the Project Leader)

1. Project Objectives And Significance (Please do not exceed the given space)

a. Purpose of the project proposed:

b. Key issues and problems being addressed:

c. Number of beneficiaries:

Patients	Paid Carers	Family Members	The General Public	Others

2. Background Of The Project And Its Feasibility

(For new projects : Please give a summary of related work already done in the specified project area by project participants and by others in the space below.

For on-going projects : Please give a progress report in the space below.)

4. Details Of Other Sources Of Funding Previously Applied For

(Please complete the following if donations or grants have previously been sought, or is simultaneously being sought, for the same or similar projects. The application progress to date, feedback or result should be stated. Please keep the Foundation informed in the event that these projects successfully obtain other sources of funding.)

Source(s)	Date of Application	Outcome	Year 1 HK\$	Year 2 HK\$	Year 3 HK\$	Total HK\$

5. Facilities And Resources Already Available

(Please describe the same or similar facilities and resources already available or secured from other sources, including a list of public, subvented and private organizations, if any, in addition to those applied for above.)

6. Projects Currently Undertaken By Project Participants

(Please give details of on-going projects currently undertaken by project participants either individually or jointly with others.)

Name of Project Participant	Project Title	Source(s) of Funds	Starting Date and Expected Completion Date	Involvement (Average no. of hours per week)

7. Supporting Documents To Be Provided

(Apart from the following documents which are absolutely necessary and fundamental to the Foundation in the consideration of the applications, additional sheets may not be attached to the application form and will be returned.)

- a. Curriculum vitae of project leader and all team members
- b. Names of two independent referees with brief curriculum vitae and addresses
(They should not be under the employment of the registered institution or association concerned. Their opinion on the project may be sought directly by the Foundation at a later stage if deemed necessary.)
- c. Vendors' quotations and detail breakdown for all items under Section B3.
- d. Annual Report or other publication on the background and history of the registered institution or association concerned
- e. Copy of evidence of registration
- f. Ethical approval of the overseeing organization, if relevant

8. Declaration (To be read and signed by Project Leader)

I have read and accept the provisions of the Guidelines for Applicants. I agree that the Trustees may in its absolute discretion refuse this application whether wholly or in part and without giving any reason. Nor should the giving of any reason in rejecting an application detract from their absolute discretion. It is further agreed and accepted that the Trustees are under no legal or enforceable obligation to consider this application.

Signature of Project Leader: _____

Name of Project Leader: _____

Date: _____

Section C Endorsement Of Organization / Overseeing Organization

(To be completed by the *Head* or *authorized representative* of the *organization / overseeing organization*. A priority list and a summary of reasons on priority assignment should be provided if more than one project proposal is submitted by the same organization, or by the member institution or association under the same overseeing organization.)

1. I confirm that this application has been evaluated and
 - a. * **Endorsed / Not endorsed** for funding from the S.K. Yee Medical Foundation; and
 - b. Funding recommended : \$_____

2. Comments on Proposal:

3. Comments on Funding Request:

4. Details of the Chief Accounting Officer to be responsible for accounting and auditing matters related to this project:

Name: _____ Post: _____

Organization: _____ Tel. No.:

Address: _____

Signature: _____ Date: _____

(Head or authorized representative of
Organization / Overseeing Organization)

Name: _____ Post: _____

Department: _____

Organization: _____

Address: _____