



**Hong Kong Obesity Society Limited**  
香港肥胖學會有限公司

## **The Hong Kong Obesity Society**

### **Research Fund 2026-27**

The Hong Kong Obesity Society (HKOS) is inviting applications of local research projects for the HKOS Research Fund (HKOSRF) for the year of 2026-27. Details are listed as below:

#### **1 Objective**

To promote and fund local research projects that can generate evidence-based knowledge or facilitate healthcare policymaking for the management of obesity.

#### **2 Eligibility**

- 2.1 The applicant of HKOSRF must be an ordinary or full member of HKOS who is practicing in Hong Kong.
- 2.2 The applicant should be the principle investigator of the research project. The funding duration is maximally for 2 consecutive years. An extension of the project beyond 2 years without additional funding is feasible but subject to approval by the Grant Review Board.
- 2.3 The applicant could apply for at most 2 concurrent projects. The applicant who wishes to apply for the third funding project MUST complete one of the concurrent projects.
- 2.4 The applicants who are current HKOS Research Fund recipients will have a lower priority than other applicants.
- 2.5 The theme of the project should be in the field of obesity.
- 2.6 Institutional ethics approval should be obtained on or before the date of funding approval notice. Written documentation of ethics approval, or of application for such approval, must be submitted with the application form if applicable (e.g. clinical trial).
- 2.7 Projects that are currently funded or under consideration by another grant-funding agency are not eligible for HKOSRF.
- 2.8 Successful applicants may be invited to present their study results in HKOS Annual Scientific Meetings (ASM).

#### **3 Award and project duration**

- 3.1 The total amount of each grant is maximally HK\$100,000 per year.
- 3.2 Subject to the financial situation of HKOS and the merits of the grant proposal, approval to more than one grant of smaller funding amounts is feasible and subject to the discretion of Grant Review Board. The final funding amount may be adjusted based on the reviewer's comments and discussion among Grant Review Board members.
- 3.3 Funding from HKOSRF is entirely based on the quality and merits of the grant proposal. No funding will be released if Grant Review Board finds no suitable proposal in that financial year.



#### 4 Assessment Criteria

- 4.1 Applications will be short-listed by a Referee Panel appointed by the HKOS, based on the following criteria of the project.
  - 4.1.1 Originality
  - 4.1.2 Scientific merit
  - 4.1.3 Design and methods
  - 4.1.4 Statistical analysis
  - 4.1.5 Outcome measures
  - 4.1.6 Research ethics
  - 4.1.7 Local relevance

#### 5 Procedures

- 5.1 HKOSRF is open for application for 1 month every April and September.
- 5.2 All applications will be undergoing a blinded review by a Referee Panel that consists of 3 adjudicators.
- 5.3 Composition of Referee Panel – Grant Review Board will invite and appoint local adjudicators with relevant research experience and subject knowledge based on the theme of proposals. Adjudicators from the local obesity community are preferred given their insights on the needs and potential impact of the research project on local practice.
- 5.4 Each proposal will be independently reviewed by 3 adjudicators.
- 5.5 After declaring any potential conflict of interest, adjudicators will score the applications by the criteria stated in 4.1. Adjudicators would be blinded to the information regarding the applicants and institution. A score ranging from 1 to 4 (see Table below) will be assigned by the referees to indicate the scientific merit under each heading in the Referee's Assessment Form. The overall rating for each application will be discussed and finalized in the Grant Review Board meeting.

	Score
Recommended for support in its current form	4
Recommended for support after minor revision or clarification	3
Recommended for support after major revision or clarification	2
Not recommended for support	1

- 5.6 Proposals with overall score of 5 or above will be invited for revision according to adjudicators' comments if applicable, and will be further reviewed by Grant Review Board for a final decision. A final decision on funding by Grant Review Board will predominantly be based on the comments from Referee Panel. However, Grant Review Board members shall deliberate among themselves if comments from the adjudicators are discordant.
- 5.7 Successful applicants will be notified by the Grant Review Board and the approved project should commence within 6 months from the date of the result announcement. Principal investigator is



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requested to submit progress report annually. Failure to submit interim report(s) may result in discontinuation of the funding.

- 5.8 Principal and co-investigators should acknowledge HKOS in any conference presentation / publications on the results related to the funded projects.

## 6 Payment of the Fund

- 6.1 The principal investigator must ensure that the expenditure incurred is within the ambit and the scope of the approved budget. A duly completed reimbursement claim form signed by principal investigator and the supporting documents thereof (including, for the latter, the original of all relevant invoices and receipts or, where invoices and receipts are not available for reasons reasonably accepted by HKOS, all declaration of expenditure duly signed by the principal investigator) to request payment by HKOS shall be submitted to the Secretariat no more frequently than every 2 months from the commencement date.
- 6.2 **For grant amount of below HK\$100,000:** A final project report and financial report should be ready within 3 months from the proposed end date of the project unless an extension of the project has been granted by Grant Review Board.
- 6.3 **For grant amount of HK\$100,000 or above:** Annual project report and financial report must be submitted by the principal investigator covering the 12- month period from the project commencement date every year, and the final project report and financial report within 3 months after the end date or within 60 days after the termination of the project, whichever is earlier.
- 6.4 **Final claim for reimbursement of expenditures:** Claims for reimbursement of expenditures may only cover the period between the commencement date and end date of the project. A final reimbursement claim form shall be submitted together with the audited account and the final report.
- 6.5 HKOSRF **WILL NOT COVER costs of premises, staff salary or overhead charges.** Budget allocation should be stated in the application and will be subjected to review by the Grant Review Board.

## 7 Termination of Funding

- 7.1 Upon advice from Grant Review Board, HKOS reserves the right to terminate further funding to a research project that violates research ethics, fails to submit a progress report, or unable to proceed as planned.

## 8 Application

- 8.1 All applications must be submitted by email ([info@hkobesity.com](mailto:info@hkobesity.com)), with the following documents in PDF format:
- 8.1.1 The completed application form
- 8.1.2 An abstract and the proposal of the research project of no more than 1,500 words
- 8.1.3 Estimated budget allocation and the detailed breakdown



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- 8.1.4 A brief curriculum vitae
- 8.1.5 Ethics approval letter (if available)
- 8.1.6 Letters from referees (if available)
- 8.2 Applications should be submitted by email on or before **31 May 2026**. Hard copies should be made available for review upon request.



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## The Hong Kong Obesity Society

### Research Fund 2026-27

#### Application form

**(Deadline: 31 May 2026)**

To: Member of Grant Review Board of HKOSRF c/o  
Secretariat of Hong Kong Obesity Society  
[info@hkobesity.com](mailto:info@hkobesity.com)

1. Principal Investigator: \_\_\_\_\_  
(Last name) (First name) (In Chinese)

2. Co-investigators: \_\_\_\_\_  
(Last name) (First name) (In Chinese)

\_\_\_\_\_  
(Last name) (First name) (In Chinese)

\_\_\_\_\_  
(Last name) (First name) (In Chinese)

\_\_\_\_\_  
(Last name) (First name) (In Chinese)

3. Corresponding address:  
\_\_\_\_\_  
\_\_\_\_\_

4. Mobile phone number: \_ \_\_\_\_\_ Office telephone: \_ \_\_\_\_\_

5. Email address: \_\_\_\_\_

6. Present and past job positions (in reverse chronological order):  
(The above information is available in the attached CV )

Period	Position	Place of work	Employer
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



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7. Member of other professional bodies  
(The above information is available in the attached CV )

- Yes, name of the professional body: \_\_\_\_\_  
 No

8. Training institute and name of supervisor / trainer:  
(The above information is available in the attached CV )

\_\_\_\_\_  
\_\_\_\_\_

9. Abstract and a brief description of the project with the following headings: Introduction/background, objectives/hypothesis, methodology including study design, interventions, sample size calculation, outcome measures and statistical analysis, existing facilities, potential for implementation of results, key references, timetable of work, ethics approval and/or consent for accessing third party data. Study design should be described in sufficient detail to allow assessment of workload and timetable and including experiments, observations to be made, randomization method, and the use of controls. (Please submit as a separate document to this application form, max 1,500 words)

10. Timetable of work:

Time (months after project commencement)	Key Milestones	Deliverables
Example: 3 months	Completion of recruitment	List of enrolled subjects

11. Is ethics approval available?

- Yes (please append a copy of the approval letter)  
 No, will apply and submit the documents prior to the commencement of the project.  
 No, not applicable (please explain \_\_\_\_\_)

12. Expected start date: (dd/mm/yy)\_\_\_\_\_ Expected end date: (dd/mm/yy)\_\_\_\_\_

13. Do you plan to apply or consider for any other sources of financial support for this training program?

- Yes  No

If yes, please give details.

Name of the supporting organization: \_\_\_\_\_

Nature of support: \_\_\_\_\_ Amount of funding  
applied HK\$ \_\_\_\_\_



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14. Declaration

I declare that all information provided in this grant application is accurate and complete. I have read and agreed to the terms and conditions as stated in Page 1 to Page 3. I shall respect the final decision of the HKOS.

Signature of Principal Investigator :	
Name :	
Date :	
Signature of co-investigator :	
Name :	
Date :	
Signature of co-investigator :	
Name :	
Date :	
Signature of co-investigator :	
Name :	
Date :	
Signature of co-investigator :	
Name :	
Date :	