

EMHS Aboriginal Health Research Grant 2022

**Application Form**



Please complete this application after reading the **Guidelines for Applicants** available at:

<https://emhs.health.wa.gov.au/Research/Aboriginal-Health-Research-Grant>

**Applications due:** 4pm Monday 27 September 2022

**1. Project Details**

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| --- | --- |
| **Title** |  |
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**2. Lead Investigator**

*The Lead Investigator (‘Coordinating Principle Investigator’ CPI) will be the key contact person during the review of this application.* ***The Lead Researcher must identify as Aboriginal or Torres Strait Islander.***

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| --- | --- | --- | --- | --- | --- |
| **Title** |   | **First Name** |  | **Surname** |  |
| **Institution** |  |
| **Department**  |  |
| **Position** |  |
| **Phone** |  | **Email** |  |
| ***CPI Qualifications and expertise relevant to this project*** |
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**3. Co-Investigators** *List all co-investigators, including (if applicable) supervisors; Add rows if required;*

***Please submit CVs in a single PDF document attachment to this Application Form.***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Title** | **First Name** | **Surname** | **Institution**  |
| **Co-Investigator 1** |  |  |  |  |
| Role in this project  |  |
| **CV Attached** | [ ]  |
| **Co-Investigator 2** |  |  |  |  |
| Role in this project  |  |
| **CV Attached** | [ ]  |
| **Co-Investigator 3** |  |  |  |  |
| Role in this project  |  |
| **CV Attached** | [ ]  |
| **Co-Investigator 4** |  |  |  |  |
| Role in this project  |  |
| **CV Attached** | [ ]  |
| **Co-Investigator 5** |  |  |  |  |
| Role in this project  |  |
| **CV Attached** | [ ]  |

**4. Collaborating Organisations**

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| List all organisations participating in this project |
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**5. Project Summary**

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| Please provide a brief **plain language** summary of the background, aims, method and expected results. **(max 300 words)** |
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**6. Alignment with Grant Objectives**

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| Describe how the project aligns with the grant objectives as described in the Guidelines. **(max 300 words)** |
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**7. Project Description**

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| Include the following sub-headings: Background/Clinical Context; Aims/Research Question; Method (including setting, participant details & statistical/analysis plan) **(max 1000 words)** |
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**8. Expected Outcomes and Translation Plan**

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| Describe the expect outcomes of the project and how this knowledge will be translated into tangible improvements to service delivery and patient outcomes within EMHS. Also describe how expected outcomes and impact will be measured and evaluated. **(max 500 words)**  |
| **Site/s**  |

**9. Project Timeline**

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| Provide dates for key steps and milestones in project start-up and completion, such as ethics and governance approvals and staff recruitment. *Add rows as required.** Funding will be available to the successful project from **14 October 2022**
* The project must commence by **January 2023**
* Projects are expected to deliver key translational outcomes in a **maximum 2-year timeframe**
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| Activity |  | Due Date |
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**10. Project Budget and Funding Request**

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| **FUNDING SUMMARY** |
| A | Total cost of project  |  |
| B | Total funding from *EMHS Aboriginal Health Research Grant* | **$60,000** |
| C | Total *In-kind* support provided by all participating organisations |  |
| D | Total *monetary ($)* funding provided by non-EMHS organisations  |  |

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| **DETAILED BUDGET** Include matched funding or in-kind support from participating organisations.  *Add rows as required.** For tips on preparing research budgets, see:

<https://emhs.health.wa.gov.au/Research/For-Researchers/Research-Governance-Information> |
| Item | Purpose | Amount ($) Requested | Monetary ($) Funding or In-Kind Support  |
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| **TOTAL** (excluding GST) |  |  |  |

**12. References**

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Please **email this completed form and attachments** to:

EMHS.REG@health.wa.gov.au

By: **4 pm Monday 27 September 2022**

If you have any problems submitting, please call (08) 9224 3189 or (08) 9224 2292.