

APPLICANT DETAILS

Name	
Organisation	
Postal Address	
Phone	
Email	
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The applicant must be a member of the eviDent DPBRN

PROJECT INFORMATION

Project title

Word limit of 20 words

Project start date	
Project end date	

Project must be completed within one year

Brief project description, in non-technical terms, including uniqueness, impact and how it will be evaluated or measured

Word limit of 250 words

Specific aims

Word limit of 350 words



Methods

Word limit of 350 words

Please attach approval from the relevant Ethics Committee

What are the expected outcomes of the project, and how will they be measured?



Provide any additional information that will help eviDent better understand the background, rationale or need for the project
Word limit of 150 words

Project location

Suburb and State/Territory required

What are the major risks identified for the project, and what mitigation strategies are in place and/or planned?



Chief Investigator A	
Chief Investigator A	
Institution	
Current appointment	
Department	
Phone	
Email	
Qualifications	
Five recent and relevant publications	

Chief Investigator B	
Institution	
Current appointment	
Department	
Phone	
Email	
Qualifications	



Five recent and relevant publications	

Name all Associate Investigators and/or Research Collaborators who will be involved in the project

FINANCIAL DETAILS

Grant funds requested

The maximum amount is \$10,000



Provide detail of expenditure for the project being applied for, from eviDent Foundation and all other sources, noting whether it has been secured or is requested

Details of expenditure	Amount requested or	Essential for project to
(include details of how the requested amounts were calculated)	secured	proceed
	(if secured, specify whether it has been provided as cash or in-kind)	(Mark with an 'E' those costs that are absolutely essential for the project to
	,	proceed)

Applicants must consider and accurately identify which budget items are absolutely essential for the project to proceed.



Total already secured	\$
Total requested	\$
Total Expenditure	\$
The amount already secured	any include in this superant. The tatel also achieve a sure of the tatel service to prove the sure of

The amount already secured can include in-kind support. The total already secured and the total requested must equal total expenditure for the Project.

BANK ACCOUNT DETAILS

Account Name	
BSB Number	
Account Number	

By submitting this form, you:

- confirm that you have read and understood the Application Guidelines
- confirm and agree that all of the information provided in this Application is accurate, true and correct
- have disclosed all financial and in-kind support from other organisation or individuals and how this support affects the overall budget
- give consent to be contacted by the eviDent Foundation should further information be required in support of the application
- consent to eviDent Foundation sharing the details of your application with relevant parties. eviDent Foundation's privacy policy is available on the <u>website</u>.
- agree to acknowledge all support received from the eviDent Foundation all promotional material relating to the project
- agree to adhere to the terms of funding as set out in the Application Guidelines

Submit application by email to <u>ask@evident.net.au</u> by no later than 30 June 2023.