Beryl Haynes Memorial Fund

Research Grant: Pitch Application Form

Before completing this form, please carefully review the Beryl Haynes Memorial Fund 2021 Grant Criteria

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| --- | --- |
| **Name of Chief Investigator (Applicant)** |  |
| **AHPRA Registration Number** |  |
| **Place of work/study** |  |
| **Telephone/email** |  |
| **Name of administering organisation**  **(if known)** | |  |  | | --- | --- | |  |  | |
| **Research area** |  |
| **Research Project Title**  **(if known)** |  |
| **Funding requested**  **(excluding GST)** | |  |  | | --- | --- | | $ |  | |
| **Background and importance of research topic**  **(maximum of 350 words)**  *What previous research exists in this area?*  *What gaps are there in the research?*  *Why is this project relevant to Tasmanians?* |  |
| **Summary of proposed project**  **(maximum of 350 words)**  *What is your research question?*  *What methodology are you likely to employ?* |  |
| **Description of applicant’s research experience**  **(maximum of 350 words)**  *Would you like mentoring for the grant application, and project if successful?*  *Do you already have ideas for a research team or mentor?* |  |

Certifications

**Certification by Chief Investigator (Applicant)**

**🞏** I certify that to the best of my knowledge the details provided in this application form and in any supporting documentation are true and complete.

**🞏** I certify that I meet all the eligibility criteria for a Chief Investigator as outlined in the Guidelines.

|  |  |  |
| --- | --- | --- |
| **Name of Applicant**  **(please print)** | **Signature** | **Date** |
|  |  |  |

**DEADLINE: Monday 30 November 2020, 5pm**

Submissions must be received by the above-specified deadline.

Late applications will not be accepted and no extension of the deadline will be considered.

Please email your completed application and any supporting material to:

[jenine.fleming@australian.physio](mailto:jenine.fleming@australian.physio)