

summer foundation   
competitive reseaRcH grant   
**Expression of interest form**

Individual

# applicant

|  |  |  |  |
| --- | --- | --- | --- |
| Title |  |  |  |
| First name |  | Last name |  |
| Phone |  | Email |  |
| Any other names you are published under |  | Application type | Postgraduate fellowship  Potential PhD student |
| University |  | Department |  |
| University physical address |  | University postal address |  |

# RESEARCH MENTOR (if applicable)

|  |  |  |  |
| --- | --- | --- | --- |
| Title |  |  | |
| First name |  | Last name |  |
| Position |  | Email |  |
| University |  | Department |  |

# Co-investigators (if applicable)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name | Current appointment | Institution | Most relevant qualification | Hours/week devoted to the project | Email address | Phone number |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

# proposed research area

|  |
| --- |
| Please select the area of research you would prefer to work on |
| Impact of the NDIS on young people in aged care: analysis of plans, funded services and outcomes  Disability housing: needs, preferences, demand and supply  Prevention of new admissions of young people to aged care  Evaluation of hospital discharge planning and follow up  Goal setting, goal attainment and outcomes  Impact and cost benefits of [Participant Led Training Videos](https://www.summerfoundation.org.au/project/participant-led-training-videos/)  Other |

# research experience and areas of interest

|  |
| --- |
| Please provide a brief summary of your research experience to date and areas of interest. (Maximum 250 words) |
|  |

# coNTRIBUTION TO THE PROJECT

|  |
| --- |
| Describe your potential contribution to the research project. What practical, clinical and research expertise do you have? How will these be applied to research at the Summer Foundation? (Maximum 300 words) |
|  |

# METHODOLOGY

|  |
| --- |
| Please outline your experience with qualitative and quantitative research methods with references to any relevant publications. (Maximum 500 words) |
|  |

# pROJECT OUTCOMES

|  |
| --- |
| **TRANSLATION**Please describe any work you have completed that involves the translation of research findings into resources, policy or practice. Please reference or provide links to any relevant material. (Maximum 200 words) |
|  |

# references

Please list 2 References.

**Reference 1**

|  |  |
| --- | --- |
| Name |  |
| Position |  |
| Institution |  |
| Email address |  |
| Phone |  |

**Reference 2**

|  |  |
| --- | --- |
| Name |  |
| Position |  |
| Institution |  |
| Email address |  |
| Phone |  |

# Applicant declaration

I declare that the information supplied in this application is true and correct and that all required supporting documents have been supplied. I have original copies of all submitted documents and understand that the Summer Foundation may request sighting the original documents for the purpose of verification. I acknowledge that all documents submitted will become the property of the Summer Foundation and will not be returned to me.

**Yes  No**

I understand that the information collected in this application form will enable the Summer Foundation to assess my application. I also understand that if I do not complete all relevant sections of this application or fail to supply necessary supporting documentation it may not be possible for the Summer Foundation to process my application.

**Yes  No**

I understand that it is a serious offence under the Criminal Code of the Australian Commonwealth to give misleading or false information and I acknowledge that the Summer Foundation reserves the right to reverse any decision made about my application for research funding if it is found that I have provided misleading or false information.

**Yes  No**

|  |  |
| --- | --- |
| Name of authorised person making  this application and declaration |  |
| Position |  |
| Date |  |
| Signature |  |