



CMHDARN RESEARCH SEEDING GRANTS 2017

Expression of Interest

Applications are to be submitted via email:

info@cmhdaresearchnetwork.com.au

Closing date for applications is:

5pm Friday 9 June

APPLICANTS MUST READ THE GUIDELINES FOR APPLICANTS PRIOR TO COMPLETING THIS EXPRESSION OF INTEREST

SUBMISSION CHECKLIST: Please ensure you have completed the following before submitting this expression of interest:

- Eligibility criteria met*
- All relevant questions answered*
- Signature from Chief Executive or equivalent provided*

The Community Mental Health Drug and Alcohol Research Network (CMHDARN) is a collaborative project between NADA and MHCC, in partnership with Mental Health Commission of NSW



SECTION A: ORGANISATIONAL DETAILS

Legal name		
Trading name		
Australian Business Number (ABN)		
Incorporation number		
Postal address		
Registered for GST	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Core business (e.g. psychosocial support)		
Organisation size	<input type="checkbox"/> 10 staff or less <input type="checkbox"/> 11 to 49 staff	<input type="checkbox"/> 50 to 99 staff <input type="checkbox"/> 100 staff or more
Main contact person (Name and position)		
Contact details	Telephone:	Email:
Alternate contact person (Name and position)		
Contact details	Telephone:	Email:
Membership/s (Tick all that apply)	<input type="checkbox"/> MHCC	<input type="checkbox"/> NADA

SECTION B: PROJECT SUMMARY

<p>Project title:</p>	
<p>Project summary: (Include purpose, relevance, aims and objectives, and the research methods and approach) (Max 300 words)</p>	
<p>Project site (i.e. setting and geographical location): (NB: projects must be completed in NSW)</p>	
<p>Total funding requested (excluding GST): (NB: must not exceed \$10,000)</p>	
<p>Project timeframe: (NB: projects must be completed by 1 December 2017)</p>	<p>Project to commence: Project to be completed: Total timeframe:</p>

SECTION C: RELEVANCE

C1. Significance

Describe why the project is important. Include reference, where appropriate, to existing research and/or practice and/or how the project links to national or state Mental Health and/or Alcohol and Other Drugs priorities. (Max 200 words)

C2. Impact

Describe the project’s expected outcomes. Will the project generate new or improved practice knowledge? How will the project impact clients/consumers? How will the project build research capacity within your organisation? (Max 200 words)

SECTION D. IMPLEMENTATION

D1. Timeline and resources

Outline the key milestones and resources needed. Include whether in-kind financial and other resources will be provided to support project delivery. (Max 200 words)

D2. Organisational capacity

Describe what governance and support structures are in place to manage the project and implement practice change. (Max 200 words)

D3. Collaboration

List potential partners in the table provided below.

Name and position title (if known)	Organisation	Potential role and contribution to project

SECTION E. PROJECT PROPOSAL

E1. Purpose: Outline the purpose of your project. Include the aims and objectives and the expected outcomes? (An outcome must include "Enhanced research capacity within the organisation"). What outputs will your project produce (e.g. journal paper)? (Max 200 words)

E2. Research question/s: List the question/s that your research will address. (Max 100 words)

E3. Methods and approach: Describe how you will carry out the project (i.e. the research methods and approach). (Max 200 words)

E4. Consumer participation: Describe how consumers/clients will be involved in the development, implementation and/or evaluation of the project. (Max 100 words)

E5. Project risks and ethical considerations: Identify key project risks and ethical considerations and how they will be addressed. (Max 200 words).

E6. Outcomes and evaluation: How will you know if your project outcomes were met? Describe how you will evaluate the project. (Max 200 words)

E7. Budget (max \$10,000 excluding GST)

Budget item*	Funding requested (GST exclusive)
Personnel/Salaries/Consultant fees	
Administration costs	
Materials/Equipment	
Other	
TOTAL	

SECTION F. CERTIFICATION AND AGREEMENT

In submitting this application, I certify that:

- The organisation has the capacity to manage the project and will provide appropriate support.
- The organisation is committed to implementing practice change, based on the results and outcomes of the project.
- I understand that successful applicants will be required to enter into a funding and performance agreement.
- I understand that submitting this application does not guarantee funding.

If this Expression of Interest is successful, I agree that:

- Grant funds will be quarantined for this specific project.
- The project will be completed by 1 December 2017.
- Accountability reports will be provided as documented in the funding and performance agreement.
- Reporting information will be used by CMHDARN/MHCC/NADA to monitor the progress of projects, for publicity purposes, and to report on outcomes of the CMHDARN Research Seeding Grants program.

Authorised by Chief Executive or equivalent (lead organisation)

Name and position	
Signature	
Date	