**Major Research Application Support**

# **Minimum Data Form**

**Due by: 1:00 pm (AWST) Wednesday 23 November 2022**

***This information is used to assist in preparing review panels and obtaining early key information.***

***When completing this form refer to the Major Research Application Support 2022-23*** [***Guidelines and Conditions***](https://fhrifund.health.wa.gov.au/Funding/Current-opportunities)***, which include application instructions. Please submit to*** [***DOH.OMRI@health.wa.gov.au***](DOH.OMRI%40health.wa.gov.au)

## Application details

|  |  |
| --- | --- |
| Application title |  |
| Coordinating Principal Investigator |  |
| Administering Institution |  |
| Amount requested (estimate) | $ |
| Peer Review Areas (up to 3)*Available from NHMRC* [*Sapphire Knowledge Base*](https://healthandmedicalresearch.gov.au/tutorials.html) *webpage, located under Research>My Applications>Peer Review Area Library* |  |

## Project summary

Provide a plain language summary of the proposal, including the aims, objectives, significance and expected benefits to the WA community. *Note, this information can be updated in the Application Form.*

*[Maximum 250 words]*

|  |
| --- |
|  |

## External Program

|  |  |
| --- | --- |
| Name of External Program funder*Entity which administers the External Program* |  |
| Name of External Program to be applied to |  |
| External Program closing date |  |
| Is a letter of support/commitment required from the Department of Health? When is the Department of Health letter required?Is a specific format or template required? | [ ]  Yes Letter of support/commitment due date: [ ]  Yes [ ]  No  |

**Research team**

Provide details of all Principal Investigators on the Project. Add rows if necessary.

|  |  |
| --- | --- |
| **Name** | **Organisation(s)** |
|  |  |
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**This document can be made available in alternative formats
on request for a person with a disability.**

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