# Congenital Heart Disease grant opportunity Sample Application questions

Please note you must complete and submit an online application on the business.gov.au portal.

This document provides a list of questions that you will be asked in the online application on the business.gov.au portal.

## Eligibility

You will also be asked to answer the following eligibility questions to progress the application:

* Is your organisation incorporated in Australia?
* Is your organisation one of the following bodies?
  + medical research institute
  + university
  + corporate Commonwealth entity
  + corporation (including businesses and not for profits)
* Do you have evidence from your board that there is support for the project, that you can complete the project and meet the costs of the project not covered by grant funding?

## Applicant address

Provide your Business Street Address (Australian Head Office).

Provide your Business Postal Address (Australian Head Office).

## Applicant financials

Has the applicant existed for a complete financial year?

What was the latest complete financial year?

**Recent Trading Performance**

* Sales Revenue (Turnover)
* Export Revenue
* R&D Expenditure
* Taxable Income
* Number of employees (headcount)
* Number of independent contractors (headcount)

## Project Information

### Project title and description

Project title

Provide a brief project description for publication.

### Detailed project description and key activities

### Provide a detailed description of your project including the project scope and key activities.

### Project outcomes

### Provide a summary of the expected project outcomes.

### Project duration

Estimated project start date

Estimated project end date

*Your project must be completed before 30 June 2024.*

### Project milestones

Milestone title, description, estimated start date, estimated end date.

*Your project must have at least one milestone.*

### Project location

Project site/s address

## Project budget

Provide a summary of your eligible project expenditure over the life of the project.

*Amounts must be GST exclusive. We only provide grant funding based on eligible expenditure. Refer to the grant opportunity guidelines for guidance on eligible expenditure.*

### Project budget summary

Eligible project expenditure:

* Labour
* Contract
* Travel
* Other

You must confirm:

* Total Commonwealth funding sought.

### Source of funding

*Show how you will fund the balance of the eligible costs, and any ineligible project costs.*

* Your contribution
* Total non-government funding
* Other government funding

## Merit Criteria

To be competitive you will need to score highly against each merit criterion.

The amount of detail and supporting evidence you provide should be commensurate with the project size, complexity and grant amount requested. You should define, quantify and provide evidence to support your answers.

Your application will be assessed against the indicators listed beneath each merit criterion.

### Merit Criterion 1 – Scientific quality

Score out of 30 and limited to 5000 characters (including spaces and paragraph returns).

You should demonstrate this by identifying

* the focus of your project, its alignment to the grant opportunity objective and how your project will complement MRFF Accelerated Research investments
* a sound and feasible research project design
* how your project will foster high quality research and innovation
* how your project will leverage existing Australian and international research and expertise.

### Merit Criterion 2 - Significance of the expected outcomes

Score out of 30 and limited to 5000 characters (including spaces and paragraph returns).

You should demonstrate this by identifying:

* the potential impact of your project’s outcome, and the novel aspects of your research
* evidence of validation of research questions by end-users in the health system including clinicians, patient groups, industry and other consumers (validation of research questions can take the form of agreement or assent to the questions, or more material support such as in-kind or financial support from other parties)
* how you will disseminate the outcomes of your project for the benefit of others.

### Merit Criterion 3 - Your capacity, capability and resources to deliver the project

Score out of 30 and limited to 5000 characters (including spaces and paragraph returns).

You should demonstrate this by identifying:

* your track record managing similar projects
* team quality and capability relevant to the application – relative to opportunity, taking into account career disruptions where applicable
* your access, or future access to, any infrastructure, capital equipment, technology and intellectual property
* how you will collaborate to improve your project outcomes and minimise duplication of effort with other key research
* a sound project plan including a risk management plan to monitor and treat the project and risks.

### Merit Criterion 4 - Impact of grant funding

Score out of 10 and limited to 5000 characters (including spaces and paragraph returns).

You should demonstrate this by identifying:

* the total investment the grant will leverage including cash and in-kind contributions
* your ability to fund your share of project costs not covered by the grant
* your project budget.

## Collaborators

Is this a joint application?

If yes, for each project partner, you will need to provide/answer the following

* Primary contact details
* Describe the type(s) of contributions the project partner will provide to the project. Examples include cash, in-kind
* Letter of support

## Application Finalisation

Conflict of Interest

Do you have any perceived or existing conflicts of interest to declare?

### **Program feedback**

How did you hear about the program?

Additional information

You should attach any additional supporting documentation here. You should only attach documents that we have requested or you have referred to in your application.

* Trust documents (where applicable)
* Evidence of support from the Board, CEO or equivalent
* Project plan, including risk management plan (maximum 12 pages)
* Detailed project budget

Indigenous organisations

Is your organisation Indigenous owned?

Is your organisation Indigenous controlled?

## Primary Contact Information

Primary application contact - Title, Given Name, Family Name, Position Title, Email Address, Phone Number, Mobile Number, Primary Address

## Applicant Declaration

Privacy and confidentiality provisions

I acknowledge that this is an Australian Government program and that the department will use the information I provide in accordance with the following:

* Australian Government Public Data Policy Statement,
* Commonwealth Grants Rules and Guidelines,
* Program or Grant Opportunity Guidelines, and
* applicable Australian laws.

Accordingly, I understand that the Department may share my personal information provided in this application within this Department and other government agencies:

1. for purposes directly related to administering the Programme, including governance and research and the distribution of funds to successful applicants and
2. to facilitate research, assessment, monitoring and analysis of other programs and activities

unless otherwise prohibited by law.

I understand that where I am successful in obtaining a grant, the financial information that I provide for the purposes of payment will be accessible to departmental staff to enable payments to be made through the department’s accounts payable software system.

I understand that information that is deemed ‘confidential’ in accordance with the Program Guidelines may also be shared for a relevant Commonwealth purpose.

The Department will publish information on individual grants in the public domain, including on the department’s website, unless otherwise prohibited by law.

**Applicant declaration**

I declare that I have read and understood the grant opportunity guidelines, including the privacy, confidentiality and disclosure provisions.

I declare that the proposed project outlined in this application and any associated expenditure has been endorsed by the applicant’s Board or person with authority to commit the applicant to this project.

I declare that the applicant will comply with, and require that its subcontractors and independent contractors comply with, all applicable laws.

I declare that the information contained in this application together with any statement provided is, to the best of my knowledge, accurate, complete and not misleading and that I understand that giving of false or misleading information is a serious offence under the Criminal Code 1995 (Cth).

I acknowledge that I may be requested to provide further clarification or documentation to verify the information supplied in this form and that the Department of Industry, Innovation and Science (the department) may, during the application process, consult with other government agencies, including state and territory government agencies, about the applicant’s claims and may also engage external technical or financial advisors to advise on information provided in the application.

I acknowledge that if the department is satisfied that any statement made in an application is incorrect, incomplete, false or misleading the department may, at its absolute discretion, take appropriate action. I note such action may include excluding an application from further consideration; withdrawing an offer of funding; using the information contained in the application for a fraud investigation that would be consistent with the Australian Government’s Investigations Standard and Fraud Control Guidelines and for management purposes and/or terminating any grant agreement between the Commonwealth and the recipient including recovering funds already paid.

I understand that I am responsible for ensuring that I have met relevant state or territory legislation obligations related to working with children, and that any person that has direct, unsupervised contact with children as part of a project under this grant opportunity, has undertaken and passed, a working with children check, if required under relevant state or territory legislation. I am also responsible for assessing the suitability of people I engage in this project to ensure children are kept safe.

I agree to participate in the periodic evaluation of the services undertaken by the department.

I declare that I am authorised to complete this form and acknowledge that by including my name in this application I am deemed to have signed this application

I approve the information in this application being communicated to the department in electronic form.

By checking this box I agree to all of the above declarations and confirm all of the above statements to be true.

## Submission of application

When you submit your application, the portal will display your submission reference number that will be your application ID. You can monitor the progress of your application in the portal.