

SOUTHERN HEALTH RESEARCH SEEDING GRANTS 2010

REQUEST FOR EXPRESSIONS OF INTEREST

Southern Health is supporting new research in mental health through the provision of Mental Health Research Seeding Grants.

A number of these small grants are available to support, or seed, research activities in Southern Health Mental Health Services. Grants range in size from \$2,000 to \$5,000. Between 2 to 5 grants will be made initially.

Personnel employed in adult mental health services in Southern Health are eligible to apply.

PURPOSE OF RESEARCH SEEDING GRANTS:

The major purpose of the mental health research seeding grant scheme are to:

- Encourage new mental health research;
- Encourage new researchers;
- Improve mental health services, service delivery or treatments to people with a mental illness; and
- Support preparatory work towards applications for external funding.

Applications which require a commitment to on-going funding are ineligible.

APPLICATIONS

Applications on the approved application form will be assessed by a panel in regard to their ability to meet these purposes. The supplied information is expected to be brief and concise. Where the project is to lay groundwork for a possible later major application then it is suggested that the project being developed be described in 'aims and research methods' with the ways in which this grant will progress the agenda described in 'tasks'. Applications longer than the stated page length will not be considered.

Font is to be Times New Roman 11 point at least.

Applications are to be emailed to
Southern.Synergy@monash.edu

Applications close at 5pm on 13th Aug, 2010



**MENTAL HEALTH RESEARCH
SEEDING GRANTS PROGRAM**

For Internal Use Only	APPL NUMBER
	DATE RECEIVED

APPLICATION FORM (3 pages maximum)

PRINCIPAL INVESTIGATOR

PRIMARY INVESTIGATOR LAST NAME	FIRST NAME	TELEPHONE
TITLE	EMAIL :	MOBILE TELEPHONE
DEPARTMENT/TEAM		
COMMITMENT		

CO-INVESTIGATORS (IF ANY)

NAME	1.		2.	
DEPARTMENT/TEAM				
EMAIL / TELEPHONE	EMAIL	TELEPHONE	EMAIL	TELEPHONE
COMMITMENT				
NAME	3.		4.	
DEPARTMENT/TEAM				
EMAIL / TELEPHONE	EMAIL	TELEPHONE	EMAIL	TELEPHONE
COMMITMENT				

BRIEF TITLE (NO MORE THAN 10 WORDS)

BRIEF DESCRIPTION (INTELLIGIBLE TO A PERSON WITH NO SPECIFIC MEDICAL OR SCIENTIFIC TRAINING AND NO MORE THAN 200 WORDS OF TIMES NEW ROMAN 10 FONT)

START DATE	END DATE	AMOUNT SOUGHT
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RESEARCH PROJECT INFORMATION

(YOU MAY DISTRIBUTE YOUR TEXT WITHIN THE TABLE AS YOU WISH BEARING IN MIND THE OVERALL 3 PAGE LIMIT ON THE FULL APPLICATION FORM. ALL TEXT MUST BE IN AT LEAST 10 POINT TIMES NEW ROMAN

AIMS	
RESEARCH METHODS AND OUTLINE PLAN	
ANTICIPATED OUTCOMES	
FUNDED TASKS THROUGH THIS GRANT AND ANTICIPATED TIME LINES	
HOW WOULD PROCESS OR OUTCOME OF THIS PROJECT BE BENEFICIAL TO MENTAL HEALTH CARE?	
ANY RELATIONSHIP TO OTHER RESEARCH:	SOUTHERN HEALTH RESEARCH
	EXTERNAL BODIES
BUDGET AND JUSTIFICATION OF BUDGET: WHAT WILL THE FUNDS BE USED FOR?	
HOW WILL THIS SUPPORT EXTERNAL RESEARCH FUNDS COMING INTO SOUTHERN HEALTH?	
REFERENCES (MAX 10)	