**APPENDIX D**

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| **Veterans’ Health Advisory Panel**  **Stage One: Application Form for 2019-20 Research Funding** | |
| *This form must be completed by the applicant, saved as a PDF, and sent to The Secretary, Veterans’ Health Advisory Panel, email:* [*helena.strange@nzdf.mil.nz*](mailto:helena.strange@nzdf.mil.nz)  *Before completing this form please read all the attached information.*  ***COMPLETED FORM MUST BE RETURNED BY NOON, 28 JANUARY 2020.***  ***Incomplete or late applications will not be accepted.*** | |
|  | |
| 1. **COVERSHEET** | |
|  | |
| **List all Principal & Associate Investigators (add extra boxes if required)** | |
| Principal Investigator & Institution |  |
| Address |  |
| Phone numbers |  |
| Email |  |
|  | |
| Associate Investigator & Institution |  |
| Address |  |
| Phone numbers |  |
| Email |  |
|  | |
| Associate Investigator & Institution |  |
| Address |  |
| Phone numbers |  |
| Email |  |

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| --- |
| **Background and experience of researchers (1 page max)** |
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| 1. **MAIN PROJECT PROPOSAL (2 pages max)** |
|  |
| 1. **What is your research title and project proposal?** |
|  |
| 1. **Questions / aims / objectives of the research** |
|  |
| 1. **Impact of the research to veterans’ health** |
|  |

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| --- |
| 1. **Addressing the *Guiding Principles* *for Investment*** |
|  |
| 1. **Research methods** |
|  |
| 1. **Main outcome measure/s** |
|  |
| 1. **Funding sought and project duration** |
| **Total Project Budget:** [total fund request] (ex GST)  **Project Duration:** [enter total project months]  **Proposed Start Date\*:** |

\*Noting the period from initial Stage one application to contract agreement can take up to 1 year.