A close-up of a logo

Description automatically generated

**PARTNERSHIP FUNDING STREAM**

**Applications to be emailed to** [**violet.marshman@latrobe.edu.au**](mailto:violet.marshman@latrobe.edu.au) **before 5pm, Friday 30 May 2025.**

**ABOUT THE ORGANISATION**

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| Legal name of the organisation: | Click or tap here to enter text. |
| Postal address: | Click or tap here to enter text. |
| Website (if applicable): | Click or tap here to enter text. |
| Is the organisation an Incorporated Association? | Choose an item. |
| If yes, which State/Territory is the organisation registered with? | Click or tap here to enter text. |
| ABN (If applicable): | Click or tap here to enter text. |

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| Number of staff | Click or tap here to enter text. |
| Number of volunteers | Click or tap here to enter text. |
| When was the organisation founded? | Click or tap here to enter text. |
| Deductible Gift Recipient? | Choose an item. |
| Tax Concession Charity | Choose an item. |
| Does the organisation have policies and procedures regarding police checks, working with children, Working with Children Checks, and the handling of child abuse complaints? Please provide details | Click or tap here to enter text. |

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| What does the organisation do?For example, what is the mission statement and what programs are delivered? (no more than 500 words) |
| Click or tap here to enter text. |

**CONTACT PERSON**

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| --- | --- |
| Title: | Click or tap here to enter text. |
| Name: | Click or tap here to enter text. |
| Surname: | Click or tap here to enter text. |
| Role: | Click or tap here to enter text. |
| Phone: | Click or tap here to enter text. |
| Email: | Click or tap here to enter text. |

**PROJECT SUMMARY**

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| Project title: | Click or tap here to enter text. |
| Grant amount requested from the Violet Vines Marshman Centre for Rural Health Research (ex GST): | Click or tap here to enter text. |
| Cash or in-kind contribution (ex GST): | Click or tap here to enter text. |
| Project start date: | Click or tap here to enter text. |
| Project end date: | Click or tap here to enter text. |
| Will the project need ethics approval? If not sure please check the [National Statement on Ethical Conduct in Human Research](https://www.nhmrc.gov.au/research-policy/ethics/national-statement-ethical-conduct-human-research). | Click or tap here to enter text. |
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| What specific health or well-being issue in rural and remote communities does this project aim to address? Please include the key characteristics of the community where the project will take place, including its demographics, health challenges, and existing health services. (500 words max) |
| Click or tap here to enter text. |

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| How does the project align with the core mission of the Violet Vines Marshman Centre: Transforming rural health outcomes through research, collaboration and community engagement? (250 words max) |
| Click or tap here to enter text. |

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| What are the anticipated short-term and long-term benefits of the project for the target community? (250 words max) |
| Click or tap here to enter text. |

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| What specific activities will the project involve, and how do these activities directly address the health needs identified?  How will it engage the local community?  What is the rationale for the proposed approach, and why will this be effective for the community? (250 words max) |
| Click or tap here to enter text. |

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| How will the project measure the success in terms of its impact on the community’s health and well-being? What will be possible flow-on effect or indirect benefit of the project? (250 words max) |
| Click or tap here to enter text. |

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| What is the detailed timeline for the project, and what key milestones will be reached during each stage? (250 words max) |
| Click or tap here to enter text. |

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| What evaluation methods will the project use to assess meeting the aims and outcomes?  What will be different in the community or wider context because of the project?  Describe how you will acknowledge the Violet Vines Marshman Centre for Rural Health Research in media stories, reports, publications and conference presentations arising from the project? (500 words max) |
| Click or tap here to enter text. |

**PROJECT BUDGET**

The total amount you can request from the Violet Vines Marshman Centre for Rural Health Research is $50,000. Applicants to the Violet Vines Marshman Centre for Rural Health Research Partnership Funding Stream will be required to commit matching cash funding to the project. In-kind contributions will be considered on a case-by-case basis providing an appropriate rationale for no cash contribution is provided.

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| **Source** | **Description** | **Type  (Cash/in-kind)** | **Amount** |
| For example, VVM Centre Click or tap here to enter text. | For example: Partnership grant | For example: Cash | For example: $50.000 |
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| **Total Cost of Project** | | | Click or tap here to enter text. |

Please complete the tables below. *Add rows as needed. All columns must be completed.*

***Funding Sources Overview****Please provide a breakdown of all project funding sources including in-kind contributions.*

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| Are you committing matching cash funds. | Choose an item. |
| If you are committing an in-kind contribution only, please provide a full justification: | |
| Click or tap here to enter text. | |
| Does the project plan to use the funding to leverage other funding sources. | Choose an item. |
| If yes, please provide details of these plans: | |
| Click or tap here to enter text. | |

**FINANCIAL INFORMATION**

**Organisations with audited financial statements:** Attach the most recent annual audited statements.

**Organisations that do not have audited financials:** Attach most recent 12 months Income and Expenditure Statement. If you have a Balance Sheet, please also submit.

**Organisations less than one year old:** Provide bank statements for the period you have been operating.