



HEALTH & DISABILITY - UNIVERSITY

This document is for reference only. Applications will only be accepted via our online system.

BEFORE YOU BEGIN

Please refer to the helpful advice provided [here](#) to assist you to more easily complete your application.

You may also like to refer to our [Privacy Policy](#).

Please note that this system **DOES NOT SUPPORT** the internet browser **CHROME**. For best results you should use Firefox or Internet Explorer.

IMPORTANT:

As well as submitting the application online you must **MAIL OR HAND-DELIVER A HARDCOPY** of the completed application **to our office by 5pm AEDST on the closing date**. Hardcopies are required as applications may be sent to external expert reviewers. Please note that applications received after the closing date **WILL NOT** be considered irrespective of the postmark date.

ATTACHMENTS REQUIRED TO BE MAILED:

- ABR printout
- Completed Application form
- Budget
- Confirmation of funding if applicable
- Letters of support if applicable
- Ranking letter (universities) if applicable.

Refer to the Attachments section for full details of all requirements.

ABOUT YOUR FACULTY/CENTRE or INSTITUTE

***Required before final submission**

***University name**

Exactly as per your ABN – Refer to the [Australian Business Register](#)

***Faculty/Centre name**

If you are applying from a faculty e.g. Faculty of Medicine, Nursing and Health Science, please write *University Name: Medicine, Nursing and Health Sciences* (this helps us to link your request to historical requests made by your Faculty).

If you are applying from a Research Centre the format should be *University Name: Centre Name*

***Australian Business Number (ABN)**

Enter in the format 12 345 678 901

THIS SECTION TO BE COMPLETED BY THE RESEARCH OFFICE – Primary Contact

The Foundation works with a specific contact person in each university.

You must [contact your university research office](#) to discuss this submission in advance of completing this application form.

***Research Office Code**

*Prefix

*First Name

*Last Name

Suffix

*Position Title

*Email address – Research Office contact

*Postal address – Research Office

*City/Suburb/Town – [Please enter in capitals e.g. MELBOURNE](#)

*State

*Postcode

*Telephone (Research Office)

[Enter in the format 0x xxxx xxxx](#)

Faculty/Centre/Institute web Address

Describe the work of your Faculty/Centre or Research Institution addressing each of the following:

***1. Please provide a brief description of your Faculty/Centre or Research Institution.**

Word count 0 of 300

***2. Who is the Dean of your Faculty and/or Head of Department (or equivalent)?**

***3. Who is your current Vice-Chancellor?**

4. Provide details of any significant organisational or financial information that have impacted on your organisation and/or faculty/centre since your most recent Annual Report and audited financial statement.

e.g. changes in funding, structure or size; changes in faculty strategic direction or research priorities, acquired property or other. Please leave blank if you have nothing to add.

Word count 0 of 200

REQUEST DETAILS

PROJECT - Primary contact

i.e. the key person from the Faculty/Institute/Centre who will manage or deliver the project.

*Prefix

*First Name

*Last Name

Suffix

*Position title

*Gender

*Email

*Office Phone

[Enter in the format 0x xxxx xxxx](#)

Mobile Phone

[Enter in the format xxxx xxx xxx](#)

- *1. Please indicate where your project will take place.**
 Select the most relevant Local Government Areas (LGAs). Postcodes can be converted to LGAs. If you need assistance please refer to this link [Local Government Areas](#) and search for your postcode(s). If your project covers EVERY LGA in a state/territory, you may select that state/territory. Select "National" if the initiative is Australia-wide.
2. If necessary, please provide any additional/clarifying information about where your project will take place.
- *3. Select from the list below to indicate the geographic reach of your project**
 Please click on this link: [Geographic Reach Classifications](#) to ensure correct classifications.
- Metropolitan Inner regional Outer regional Remote Across all areas
- *4. Indicate which population group(s) will be served by your proposed project.**
 You may select up to 4 population groups.
- CALD
 - Parents/families
 - Gay, Lesbian, Bisexual, Transgender, Intersex
 - Indigenous people/communities
 - Refugees/New Arrivals
 - Single Parents
 - Other
 - Not relevant/no specific target
- *5. Select the Gender group which will benefit most from your project**
- All males
 - Majority males >60%
 - All females
 - Majority females >60%
 - Equal male and female
 - Gender irrelevant
- *6 Which age groups will most benefit from your project?**
- Babies and early childhood (0-5)
 - Children (6-12)
 - Adolescents (13-18)
 - Young adults (19-25)
 - Adults (26-64)
 - Seniors (65+)
 - All age groups
 - Not relevant
- *7a. Which of the issue area(s) will you be working in?**
 You can select a maximum of 4 areas
 Community and economic development
- Economic development
 - Employment
 - Job creation and workforce development
 - Job training/work experience
 - Supported employment services

Health

- Diseases and conditions
 - Brain and nervous system disorders
 - Autism
 - Other (Alzheimer's, Parkinson's, MS, Epilepsy, Cerebral palsy, etc.)
 - Spinal cord injuries and diseases
- Cancers
- Digestive system diseases
- Ear, nose and throat diseases
- Endocrine, nutritional and metabolic diseases (e.g. diabetes)
- Eye diseases
- Genetic conditions and birth defects
- Heart and circulatory system diseases
- HIV/AIDS/Hep C
- Infections and parasitic diseases (e.g. Malaria)
- Kidney diseases
- Mental and behavioural disorders
 - Alcoholism
 - Depression
 - Stress
- Musculoskeletal diseases (e.g. arthritis)
- Respiratory system diseases
- Skin conditions
- Health care access
- Health care administration and financing
- Health care aids/equipment
- Health care quality
- In-patient medical care
 - Burn care
 - Community health care
 - Convalescent care
 - Hospital care
- Medical support services (blood banks, donor banks, emergency services)
- Mental health care
 - Crisis intervention/support (e.g. telephone hotlines)
 - Eating disorders
 - Mental health counselling (including support groups)
 - Residential mental health care
 - Smoking
 - Substance abuse (prevention and treatment)
- Out-patient medical care
 - Community nursing
 - Dental care
 - E Health
 - Hearing care
 - Preventative care
 - Vision care
- Palliative care
- Public health
- Communicable disease control
- Environmental health
- Physical fitness (exercise, obesity, nutrition)
- Sexually transmitted disease control
- Water access, sanitation and hygiene

- Rehabilitation
 - Art, music, play and animal therapy
 - Physical therapy
 - Speech and hearing rehabilitation
- Reproductive Health care
 - Maternal and perinatal health
 - Infant care
 - Prenatal care

Human Services

- Family services
 - Family/carer disability resources
- Personal services
 - Personal (client) skills/resilience
 - Self-advocacy

Other

7b. Issue area

If you selected 'other' in the list above, please include the issue area(s) you will be working in.

***8. Title of project**

Word count 0 of 15

***9. Describe your proposed project**, clearly stating what you want to do with the funds.

Please provide a brief statement of what your project intends to do and achieve. You will have opportunities to expand further in the application.

This grant will enable us to...

Word count 6 of 100

***10. What are the identified needs that will be addressed by this project? Please provide your data sources.**

This question is seeking to understand why this project is required, do you have evidence of need for your project to take place? If so, it always helps to provide details on what this evidence is.

Word count 0 of 150

***11. The Foundation values collaboration. Which partners will you work with to deliver this project?**

If you are working with or involving external partners please briefly outline how they will be involved.

If you are you working with other organisations in the delivery of your project we recommend you provide letter(s) of support from key partners to demonstrate their commitment to the work. You can add letters of support via the application Attachment section.

Word count 0 of 150

***12. What is the primary type of project support you are seeking?**

- Capital and Infrastructure
 - Equipment purchase
 - Collections acquisition
 - Land/building acquisition
 - Building and renovations
- Core funding/operations
 - Backbone support for collective/sector activities
 - No Interest Load Scheme (NILS) injection
 - Scholarship/Ticket subsidies
- Dissemination/promotion
- Organisation capacity building

- Fellowship chair
- IT/database/website upgrade
- Professional development/mentorship
- Volunteer coordinator/recruitment
- Program Development
 - Curriculum/business plan development
 - Pilot program
 - Program creation
 - Program expansion
 - Program maintenance
 - Program replication
- Research/evaluation
 - Data, taxonomy, mapping and/or measurement systems
 - Program evaluation
 - Research
- Social Enterprise
- Transport
- Unknown/other

***13. How does your project relate to the Health & Disability funding objectives?**

- Improve health outcomes for the Australian community through public health initiatives. Large-scale multi-year projects are encouraged.
- Encourage innovative approaches to increasing employment opportunities for individuals with disability.

Word Count 0 of 300

***14. Has this project been done or researched in Australia or internationally? What makes your organisation best placed to deliver it in Australia?**

Word Count 0 of 200

***15. Total cost of the project**

Please do not include dollar signs and round up to the nearest dollar e.g. 147,880

***16. How much are you requesting from The Ian Potter Foundation?**

Please do not include dollar signs and round up to the nearest dollar e.g. 165,000

***17. How long (in months) will it take to complete your project?**

i.e. 12 if your project will take one year, 24 for two years etc

18. If your request is for a grant to be paid over more than one financial year, please detail as in following example -

e.g. Request is for \$50,000 p.a. over 3 years for a total of \$150,000.

Leave this field blank if you are requesting one payment only.

***19a. Project start date.**

Please refer to [the funding round dates](#) for the earliest date that your project may start. We do not fund retrospectively. Please contact the office on (03) 9650 3188 should you wish to discuss the timing of your project further.

***19b. Project end date.**

20a. The Foundation expects that there will be risks associated with every project.

If you have a pre-existing risk matrix or contingency plan please upload it here.

20b. If you don't have a risk matrix or contingency plan, refer to our [examples here](#) as a prompt to assist you in formulating your risks.

Please outline what risks may affect the successful completion of your project and how will you mitigate against them?

Word count 0 of 150

21. What is your sustainability plan? i.e. self-funding, Government support, other philanthropic grants, etc. If relevant, where and how will you source the funding needed to sustain the project?

Word Count 0 to 200

22. The Ian Potter Foundation values knowledge sharing. What plans, if any, do you have to share the results of your work with others?

Word count 0 of 150

GOALS/ACTIONS/OUTCOMES

A minimum of 2 project goals must be completed. If you are successful in securing a grant, you will be required to report against achievement of these goals. You should ONLY state short-term goals that you intend to achieve during the life of the project (long term outcomes are covered below).

Goals should be short-term outputs; KPIs/timeline actions can also be known as activities. For more information on "SMART", see [SMART Goals](#). Please include SMART-specific, measureable, achievable, relevant and time-bound actions in your timeline. Make sure you consider things you will be measuring within your project (number of participants, workshops, publications).

EXAMPLE

(i) Goal

Improve diabetes awareness (as measured by the DA-IV scale) within the Flatville housing commission;

(ii) Timeline

1: By June 2019, we will hire a project manager;

2: By September 2019, we will hold 3 diabetes awareness workshops for a total of 60 women.

(iii) Measurements i.e. Short-term measure of success (what can be measure by the end of the grant period, longer term outcomes are covered below).

1: 80% of workshop participants will score 3 or lower on Clarke et al's (1995) assessment of hypoglycaemic awareness after 2 months.

2: 60% of workshop participants will retain a score 3 or lower on Clarke et al's (1995) assessment of hypoglycaemic awareness after 8 months.

Project Goals 1 to 5 (2 Project Goals required)

***(i) What is your first goal?**

Word count 0 of 70

***(ii) Please provide a timeline of the actions/KPI's necessary to achieve this goal.**

e.g. When will you: consult others; undertake planning; advertise your event; undertake background checks etc?

Word count 0 of 70

***(iii) What measurements will you put in place to determine if you have achieved your goal?**

Word count 0 of 70

LONG-TERM OUTCOMES AND MEASUREMENTS

*** (i) From the following list, select a maximum of three long-term outcomes**

- Promotion/dissemination of best practice/new knowledge (including conferences and media appearances)
- Improved operational capacity/capability (including staff size, geographic coverage)
- Improved skill base
- Improved quality of policy/policy dialogue
- Improved service delivery/quality
- Improved service system/sector collaboration
- Employment rate/numbers by sex, age and persons with disabilities
- Average hourly earnings of persons with disabilities
- Mortality rate attributed to cardiovascular disease, cancer, diabetes or chronic respiratory disease
- Reduced/eradicated prevalence rates of (a particular) disease

*** (ii) How will you evaluate these outcomes?**

e.g. What specific indicators will you use for each outcome? Who (Internal/External) will lead the evaluation/collect the data?

Word count of 0 to 150

*PROJECT BUDGET

You must submit a Budget for your project - both online and in hardcopy. Please use our [Budget Template](#).

Your itemised budget should include the following headings where applicable.

Income

- confirmed grants from government or other funding sources
- unconfirmed funding requests
- cash contributions from your organisation
- inkind contributions

Expenditure items

- a breakdown of salaries
- consultants fees
- capital costs
- administration costs
- equipment purchases
- advertising and/or promotion etc.

PLEASE NOTE

Where relevant you must itemise each section, refer to example:

Income

Grants from government or other funding sources: \$93,000

- ABC Foundation \$15,000
- 123 Trust \$28,000
- Government \$50,000

***UPLOAD YOUR PROJECT BUDGET.** A printed copy of your Budget must be mailed with the hardcopy of your application to the foundation.

ATTACHMENT SECTION

PLEASE read this section carefully. The application and all requirements must be submitted online but we also require a hardcopy of the application and some of the requirements to be mailed to the Foundation.

PRINTING A HARDCOPY

Please print the application AFTER you have submitted it online - NOT while it is in progress.

In your My Account select Submitted Applications from the drop-down menu and open your application. It will appear as a webpage. From your internet browser menu select Print and print the application in Portrait orientation.

UPLOADING FILES TIP: File Names with symbols e.g. backslash, ampersand etc in the file name will not be accepted by the system.

MAIL OR HAND-DELIVER THE FOLLOWING - to be received in our office by 5.00pm AEDST on the closing date.

- ABR printout of your organisations details from the [Australian Business Register](#)
- Ranking letter (if applicable)
- the completed application
- the budget
- letters of support (if applicable)
- letters of confirmation of funding (if applicable)

Address:

The Ian Potter Foundation
Level 3, 111 Collins Street
MELBOURNE VIC 3000

RESEARCH / GRANTS OFFICE

Ranking

In the case of multiple applications in one or more program areas (other than travel and conference grants), advice must also be provided as to the priority ranking of all such applications.

UPLOAD the following requirements

1. Declaration

Print a copy of the application Declaration and arrange for it to be signed and dated by the Director of the research institute, CEO or other signatory as specified on the Declaration. Then scan it and upload it as an attachment. Click [here to download the Declaration](#)

2. ABR print-out

A scanned print-out of your university/organisation's details from the [Australian Business Register](#)

PROJECT PRIMARY CONTACT

Upload the following where applicable and note that you should also provide your Research Office contact with hardcopies (they must be received with the hardcopy of your application in our office by 5pm on the closing date)

1. Letters of support

Include letters of support if you are working in partnership with another organisation, or working with other organisations in the delivery of your project as they demonstrate that you have their support. Please ensure that support letters provide sufficient detail of exactly what support is being provided by each organisation i.e. funding (cash amount), staff/personnel, research, other items of 'in kind' support etc.

Letters of support should be specific to each supporting organisation and it is recommended that you do not use or provide them with a 'cut and paste' template.

You may include up to 3 letters of support and it is helpful to us if the file name indicates which organisation/person has written it.

2. Letter(s) of confirmation

If you have received confirmation of funding from other foundations / trusts, governments, outside sources the letter(s) of confirmation should be attached. You may include up to 3 letters of confirmation.

3. A letter of support from the Head of Department

A letter of support from the Head of Department stating why the application is a priority for the institution and with confirmation of cash support would be highly regarded.

4. Other e.g. business plans, building designs, wireframes, evaluations, program logic etc.

Note: If further information is needed in the review of your project you may be contacted prior to the Board Meeting at which the grant request is to be considered.

You should receive notification of the outcome of your application by mail within four months of the funding round closing date.