**WATER SAFETY RESEARCH FUND 2018-19**

**APPLICATION FORM**

***This application form is for research funding only***.

* If you are seeking funding for drowning prevention programmes (like Water Skills for Life) use the application form titled *Drowning Prevention Investment Programme 2018-19.*

Before you get started please note:

* Ensure that this Application Form is read in conjunction with the *Water Safety New Zealand Investment Prospectus 2018 – 2019.*
* All applications must demonstrate that the proposed research will contribute to meeting the water safety knowledge themes that are described in the *Water Safety New Zealand Investment Prospectus*.
* A separate application form must be completed for each research project submitted.
* All completed application forms are to be uploaded onto the Water Safety New Zealand at [www.watersafety.org.nz](http://www.watersafety.org.nz) no later than

***10am Monday 21 May 2018.***

* **Late or incomplete applications will not be accepted.**

**Tell us your details**

|  |  |
| --- | --- |
| **Name of Group/Organisation** |  |
| **Contact Person** |  |
| **Postal Address** |  |
| **Email** |  |
| **Phone** |  |

**Tell us about your research project**

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| 1. **What is the name of your research project?**
 |
|  |
| 1. **What is the name of your host organisation? (If applicable.)**
 |
|  |
| 1. **Who is the lead researcher?**
 |
|  |
| 1. **Identify your project category**
 |
| **❑** | **New research project** | **❑** | **Continuation of an existing research project**  | **❑** | **Extension of an existing research project** |
| **Comment** |
| 1. **Maximum timescale**
 |
| **❑** | **One Year** | **❑** | **Two Years** | **Start date:** |  |
| **Comment** |

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| 1. **Summarise your research project**
 |
| **Premise** |
| **Aims** |
| **Method and analysis** |
| **Timeline and deliverables** |
| **Potential water safety outcomes** |

**Funding Criteria**

(Please refer to the Funding Prospectus for details)

**Step one: Research Priorities**

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| 1. **Identify the water safety knowledge theme(s) to which your research will contribute**
 |
| **❑ Horizon scanning****❑ People and prevention** **❑ Sector effectiveness****❑ Rescue and Response****❑ Programme Evaluation** |

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| 1. **How does your research contribute to the knowledge theme(s) chosen?**
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|  |

**Step two: Assessment Criteria**

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| 1. **Summarise how the results of your research project will have:**
 |
| ***Impact***  |
| ***Strategic value***  |
| ***Feasibility*** |
| ***Sustainable***  |

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| 1. **How will water safety sector stakeholders find out about the new knowledge created by this research project?**
 |
|  |

**Project details**

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| 1. **Are you undertaking (or have recently completed) any other projects that overlap with, or are relevant to, this research project?**
 |
| **❑ No - Go to question 12****❑** **Yes - Please provide details**  |

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| 1. **Name and summarise the research expertise of participating researchers**
 |
| **Lead researcher** |
| **Researcher 2** |
| **Researcher 3** |

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| 1. **Does the research team have a track record and/or the capability to deliver the project on time and to standard?**

**Do you have any referees?** |
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| 1. **Have any other organisations been approached to participate, fund or receive information from this research project?**
 |
| **Organisation** | **Interest/role** | **Confirmed?****Y / N** |
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| 1. **Are there any privacy and ethics issues that need to be addressed?**
 |
| **❑ No - Go to question 16****❑** **Yes – What is proposed to address them?** |

**Tell us about your Budget** (All figures to exclude GST)

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| 1. **How much funding from WSNZ are you seeking?**
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| 1. **What is the total project cost?**
 |
| **List all expenses** | **$** |
|  |  |
|  |  |
|  |  |
|  |  |
| **TOTAL** | **$** |

|  |
| --- |
| 1. **List any additional income sources for the project**
 |
| **List all income (including in kind)** | **$** |
|  |  |
|  |  |
| **TOTAL** | **$** |

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| --- |
| 1. **How much of this additional income has been confirmed?**
 |
| $  |

**Final sign-off and checklist**

**Declaration**

|  |  |
| --- | --- |
| **❑** | I declare that all the information given in this application to be true and correct. I am authorised to sign this application on behalf of the group / organisation named herein |
| **❑** | I have read the 2018/19 WSNZ Investment Prospectus |
| **❑** | I have completed the checklist below: |
|  | **❑** | I am seeking research funding |
|  | **❑** | My research contributes to one of the water safety knowledge themes  |
|  | **❑** | All questions are completed |
|  | **❑** | Partner organisations are confirmed by attaching letters of support |
|  | **❑** | The declaration is signed by an Authorised Person |

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| **Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Designation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |