**Cover Page**

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| --- | --- |
| **Project Title** | Click or tap here to enter text. |
| [**Affiliated Theme(s)**](https://www.cmdt.org.nz/themes)(indicate all that are applicable) | [ ]  Screening / Diagnostic Technologies |
| [ ]  Interventional Technologies |
| [ ]  Rehabilitation Technologies & Assistive Devices |
| [ ]  Digital Technologies for Prevention, Care, and Management |
| [ ]  Emerging New Technologies in Healthcare |
| [**Capability Module(s)**](https://www.cmdt.org.nz/healthtech-capability-programme) **this project would like to access to support this work** (indicate all that are applicable) | [ ]  Mātauranga Māori |
| [ ]  Pacific Engagement |
| [ ]  Future Leaders |
| [ ]  Clinical Translation |
| [ ]  MedTech Translation |
| **Project Leader Details** | Project Leader must be from a NZ university, DHB/Health Provider, or CRI |
| **Full name** **(inc title & qualifications)** | Click or tap here to enter text. |
| **Job Title** | Click or tap here to enter text. |
| **Organisation** | Click or tap here to enter text. |
| **Email** | Click or tap here to enter text. |
| **Phone** | Click or tap here to enter text. |
| **Project Team & Affiliations** | Project team (including Project Leader, above) must include members from at least two institutions, (NZ universities, DHBs/health providers, CRIs), one of which must be a CMDT partner (AUT, UoA, UC, UoO, VUW, CI). Inclusion of / discussions with a Technology Transfer Office manager (or similar) on this project is desirable. Also list any main industry collaborator(s).Click or tap here to enter text. |
| **Proposed Dates**(max duration 1 year) | **Start Date:** Click or tap to enter a date. | **End Date:** Click or tap to enter a date. |
| **Proposed Budget**(total amount, max $20,000 + GST) | Total budget may not exceed $20K excl GST for the duration of the project - $10K for collaboration, $10K for discrete activities (see guidelines).Click or tap here to enter text. |
| **Other funding sources** | Provide details of any alternate sources of funding for this project and/or other sources of funding that this project will leverage (e.g. Marsden, HRC). If none, please indicate as N/A.Click or tap here to enter text. |
| **Te Tiriti Partnership & Māori Capability Outcomes** | This should be addressed in the proposal (see Section 3). If relevant, list Māori collaborators associated with this project and their roles here.Click or tap here to enter text. |
| **Pacific Partnership and Capability Outcomes**  | This should be addressed in the proposal (see Section 4). If relevant, list Pacific collaborators associated with this project and their roles here. Click or tap here to enter text. |

**Instructions**

**Complete each of the sections below, entering details in text boxes provided. Instructions are provided in blue text and may be deleted prior to submission.**

1. **A. Team details + B. Proposal Details + C. References**
2. **Project milestones and deadlines**
3. **Budget (Excel template)**

**Delete this page prior to submission.**

**1A. Team Details**

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| * + Maximum pages (using Arial 10 font) = 3 pages.
	+ Enter Team Member details, one table per member; delete / add tables as necessary.
	+ Ensure proposal involves team members from at least two institutions, i.e. NZ university, DHB/healthcare provider, and/or CRIs. At least one member in this proposal must belong to a CMDT partner (AUT, UoA, UC, UoO, VUW, CI). Industry collaborators should be listed but are not counted as one of the two institutions anchoring this proposal.
	+ Summary biographies are requested in lieu of full CVs.
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| **Project Leader** |
| Full name (inc title & qualifications) | Click or tap here to enter text. |
| Organisation | Click or tap here to enter text. |
| Location | Click or tap here to enter text. |
| Summary biography(max 100 words) | Click or tap here to enter text. |

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| **Team Member 2** |
| Full name (inc title & qualifications) | Click or tap here to enter text. |
| Organisation | Click or tap here to enter text. |
| Location | Click or tap here to enter text. |
| Summary biography(max 100 words) | Click or tap here to enter text. |

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| **Team Member 3** |
| Full name (inc title & qualifications) | Click or tap here to enter text. |
| Organisation | Click or tap here to enter text. |
| Location | Click or tap here to enter text. |
| Summary biography(max 100 words) | Click or tap here to enter text. |

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| **Team Member 4** |
| Full name (inc title & qualifications) | Click or tap here to enter text. |
| Organisation | Click or tap here to enter text. |
| Location | Click or tap here to enter text. |
| Summary biography(max 100 words) | Click or tap here to enter text. |

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**1B. Proposal Details**

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| Maximum pages (using Arial 10 font):* + Questions 1 and 2 = 1 page total
	+ Question 3 = 200-word limit
	+ Question 4 = 200-word limit
 |
| 1. **Details of proposed collaboration**
 |
| **Outline:*** + Importance of this collaboration to Te Tītoki Mataora MedTech Research Translator network
	+ Goals of collaboration
	+ What will be achieved from this project
 | * + Anticipated outcomes of the project
	+ Next steps for this collaboration
 |
| Click or tap here to enter text. |
| 1. **Plan to progress**
 |
| Provide project plan explaining what activities will take place, and timelines for these.Click or tap here to enter text. |
|  |
| 1. **Te Tiriti Partnership and Māori Capability Outcomes (max 200 words)**
 |
| How would your collaboration address engaging and working with Māori, and support their leadership and research capability in the future?Click or tap here to enter text. |
| 1. **Pacific Partnership and Capability Outcomes (max 200 words)**
 |
| How would your collaboration address engaging and working with Pacific communities, and support their leadership and research capability in the future?Click or tap here to enter text. |

**1C. References**

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| * + Maximum pages (using Arial 10 font) = 1 page
 |
| **References** |
| Click or tap here to enter text. |

**2. Project Milestones & Deadlines**

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| * + Briefly outline up to 3 milestones and select deadlines
 |
| **#** | **Proposed Milestones** | **Deadline** |
| 1 | Click or tap here to enter text. | Click or tap to enter a date. |
| 2 | Click or tap here to enter text. | Click or tap to enter a date. |
| 3 | Click or tap here to enter text. | Click or tap to enter a date. |

**3. Budget**

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| --- |
| * + Complete Excel template and submit with proposal document
	+ Ensure budget is reviewed / approved by appropriate Finance Manager / Research Office / TTO
 |