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| Koolin Balit Conference Grants |
| Eligibility Information sheet and application form |

**Background**

Koolin Balit is the Victorian government’s strategic directions for Aboriginal health. A key enabler in Koolin Balit is to maximise the use of research and evidence. Conducting evaluation and having the opportunity to share evaluation findings is a key strategy towards achieving this aim.

**Overview**

**The Victorian Department of Health and Human Services is offering one-off grants of up to $2000 to assist individuals to travel and attend conferences within Australia where they have been accepted or invited to make an oral presentation about Aboriginal health initiatives being implemented in Victoria.**

**Please note: Only one grant per presentation is available. Hence, if the initiative is presented by more than one person, either from the same organisation or in partnership with another organisation and either both presenters or organisations apply the grant must be shared.**

**Eligibility**

* Applicants must be employees or clients of an organisation providing healthcare services in the state of Victoria.
* Eligible organisations include Aboriginal community controlled health organisations, hospitals, community health services, primary care partnerships and non-government organisations funded by the Victorian DHHS providing health services to Aboriginal people.
* Applications will only be considered after an abstract has been accepted for oral presentation or an invitation to present an oral presentation has been received in writing from the conference organisers. Poster presentations are not eligible.
* The planned presentation must include some form of review, quality improvement or evaluation of an Aboriginal health initiative. Presentations that are purely descriptive are not eligible for a grant.

**How you can apply for a grant**

The process to apply for a grant is:

* Undertake an evaluation, quality improvement process or review of your Aboriginal health initiative.
* Submit an abstract or expression of interest to a relevant conference, as per the conference organisers’ requirements.
* Upon acceptance or invitation to present, complete the Koolin Balit conference grant application form and send it, together with your accepted abstract, proof of acceptance or invitation, registration costs and travel/accommodation quotes to DHHS by email to [aboriginalhealth@dhhs.vic.gov.au](mailto:aboriginalhealth@dhhs.vic.gov.au).
* The Department’s Aboriginal Health Evidence and Evaluation Working Group, which brings together data and evaluation experts, will review all applications for relevance of both the chosen conference and the planned presentation.

**Timelines**

Applications will be accepted **up until 30 March 2017.**

Upon receipt of your application, you will receive an acknowledgement within 3 days and advice of whether you have been successful within 14 days. If you require a faster turnaround, please note this on your application form.

**Contact details**

For further information please contact:

Snezana Milosavic on T 9096 0025 or email [snezana.milosavic@dhhs.vic.gov.au](mailto:snezana.milosavic@dhhs.vic.gov.au) or

Bruce Watson on T 9096 6131 or email bruce.watson@dhhs.vic.gov.au.

**Koolin Balit Conference Grant Application Form**

**Please ensure all sections are completed**

| **Applicants details** | | | |
| --- | --- | --- | --- |
| Name and title of applicant |  | | |
| Contact phone number |  | | |
| Email address |  | | |
| Organisation |  | | |
| Does the organisation provide healthcare services in Victoria? |  No  Yes | | |
| Please mark which type of organisation the applicant is employed by. | **** | Aboriginal community controlled health organisations | |
|  | hospitals |  community health services |
|  | primary care partnerships | |
|  | non-government organisations | |
|  | Other: Please specify | |
| Are you Aboriginal or Torres Strait Islander origin?  No  Yes, Aboriginal  Yes, Torres Strait Islander | | | |
| **Conference details** | | | |
| Conference name |  | | |
| Title of presentation |  | | |
| Conference date |  | | |
| Conference location |  | | |
| Is the conference health focused? |  No  Yes | | |
| Is the conference Aboriginal /Indigenous specific? |  No  Yes | | |

| **Program / Presentation details** | |
| --- | --- |
| Has you applied and being successful to present at the conference? |  No  Yes |
| Name of program you are presenting. |  |
| Is the program funded by the Victorian DHHS to provide health care services to Aboriginal people? |  No  Yes, Please provide a brief summary: |
| Has the program undergone an evaluation, review or quality improvement process? |  No  Yes, Please provide a brief summary: |
| Is it an oral Presentation |  No  Yes |

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| **Budget proposal** | |
| **What is the total funding being applied for :** | |
| **Item** | **Amount ($)** |
| Travel to conference |  |
| Accommodation (will only be covered for the nights immediately preceding and during the conference) |  |
| Conference registration fee |  |
| Other, please specify |  |
| **Total** |  |

Signature of applicant: Date:

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Signature of Organisations CEO: Date:

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Name of organisation CEO:

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Please note: This form, and the necessary attachments as listed below should be emailed to aboriginalhealth@dhhs.vic.gov.au

**Attachments must include:**

* Letter of acceptance or invitation to present
* Abstract that was submitted and accepted
* Proof of conference registration fee
* Quotes for accommodation and travel

**\*\* Have you completed all sections? Incomplete application forms may cause a delay in processing your application \*\***