

SUPPORTIVE CARE INTERVENTION PROGRAM

GUIDELINES FOR APPLICANTS

cancer
institute
NSW



*All cancer clinical service disciplines will be supported by the Cancer Institute NSW
Cancer Grant Program including behavioural, biomedical, clinical,
epidemiological, health services, and psycho-social disciplines
unless otherwise stated within the individual program.*

CLOSING DATE (5PM) 9TH APRIL 2010

TABLE OF CONTENTS

1	ACRONYMS AND DEFINITIONS	3
2	OVERVIEW OF CANCER INSTITUTE NSW AND STATE CANCER PRIORITIES	4
3	INTRODUCTION TO THE CANCER INSTITUTE NSW SUPPORTIVE CARE INTERVENTION PROGRAM	4
4	OBJECTIVES	6
5	ELIGIBILITY	7
6	SELECTION CRITERIA	8
7	REVIEW CONSIDERATIONS	9
8	ADMINISTERING INSTITUTION RESPONSIBILITIES	9
9	PERMITTED USE OF SUPPORTIVE CARE INTERVENTION PROGRAM FUNDS	10
10	CANCER INSTITUTE NSW POLICY DOCUMENTS	10
11	REPORTING REQUIREMENTS	10
12	SITE VISIT / AUDIT	11
13	ACKNOWLEDGEMENT OF SUPPORT	11
14	PRIVACY AND CONFIDENTIALITY	11
15	INTELLECTUAL PROPERTY	12
16	CONFLICT OF INTEREST	12
17	FUNDING AGREEMENT	12
18	VARIATIONS TO FUNDING THE AGREEMENT	12
19	TIMEFRAME	12
20	SUBMISSION PROCEDURES	12
21	ENQUIRIES	13

1. ACRONYMS AND DEFINITIONS

Acronyms

ARC	Australian Research Council
NHMRC	National Health and Medical Research Council

Definitions

Administering Institution* The institution that receives and administers the funds. For the purposes of GST arrangements, this institution is defined as the supplier.

Applications are lodged through the Administering Institution.

Actual Institution(s)* The institution(s) at which the grant will be undertaken

**The Administering Institution and the Actual Institution may be the same institution.*

Distress A multifactorial unpleasant experience related to psychological, social, physical or spiritual aspects of cancer, the cancer journey or its treatment.

Distress Screening Screening for distress, using touch-screen technology, covering psychosocial, practical, and physical domains (including pain and other symptoms).

GST Goods and Services Tax imposed in accordance with the A New Tax System (Goods and Services Tax) Act 1999, and related Acts and Regulations.

Intellectual Property Includes all industrial and intellectual property rights including but not limited to copyright, patents, trade/business or company names, registered and unregistered trademarks, registered designs, trade secrets, know how, rights in relation to circuit layout and all other rights of intellectual property as recognised by the law in force in NSW.

Supportive Care Care provided to cancer outpatients that addresses physical (pain and other symptom management), psychological (anxiety and depression), practical (including information and social), and spiritual support.

Supplier Means the persons or bodies party to the written agreement engaged to perform the services and includes officers, employees, agents and authorised sub-contractors (and their employees and agents) utilised by the Supplier.

2. OVERVIEW OF CANCER INSTITUTE NSW AND STATE CANCER PRIORITIES

INTRODUCTION

The Cancer Institute NSW is Australia's first state-wide, government supported cancer control agency. We are saving lives through promoting the best cancer research, prevention, early-detection, and treatment and education initiatives. The Cancer Institute NSW is supporting evidence based practice via targeted interventions in cancer care in New South Wales by working in partnership with the leaders in the field to deliver the best cancer results for the people of New South Wales. Health service intervention programs will provide the evidence that will drive rapid improvements in cancer care. Health service research in cancer care will identify the most effective and efficient ways to organise, manage, finance and deliver high quality care to patients.

CRITERIA OF THE SUPPORTIVE CARE INTERVENTION PROGRAM

Applications will be reviewed based on selection criteria and indication of the following broad criteria:

- Consistent with Cancer Institute NSW objectives;
- Commits to a cohesive and productive working partnership with cancer services and intervention partners;
- Supports an information sharing culture and is willing to provide advice to the Cancer Institute NSW about intervention learnings relevant to a potential State roll out following program evaluation;
- Supports a site visit at Program sites by Cancer Institute NSW staff and/or members of the NSW Grants Review Committee.

STATE CANCER PRIORITIES

The Cancer Institute NSW has the statutory responsibility to substantially improve cancer control in NSW under its Act.

The specific objectives of the Cancer Institute NSW are to:

- I. increase cancer survival;
- II. reduce cancer incidence;
- III. improve the quality of life of cancer patients and their carers; and
- IV. provide expert advice to patients, the public, health care professionals and the Government.

3. INTRODUCTION TO THE CANCER INSTITUTE NSW SUPPORTIVE CARE INTERVENTION PROGRAM

- 3.1 The Supportive Care Intervention Program aims to develop a patient centred approach to cancer supportive care and to build the evidence base related to routine distress screening and integrated supportive care for cancer outpatients (day only patients), across public and private sectors, undergoing treatment (including chemotherapy and/or radiation therapy and excluding haematology patients) and surveillance.
- 3.2 For the purposes of this Program, *distress* is defined as biopsychosocial distress (see *Acronyms and Definitions* -page 3).
- 3.3 The main Program outcome of interest is reduced patient distress via an integrated supported care program including computer based distress touch-screening, effective consultation and referral to relevant support/interventions, tailored patient information, the use of question

prompt lists (http://www.cancerinstitute.org.au/cancer_inst/patients/questions.html) and staff training on distress screening and effective consultations/referral, and training for external psycho-oncology staff who do not typically take cancer referrals, including allied health professionals accessible under the Medicare Plus initiative.

- 3.4 The Supportive Care Intervention Program targets NSW cancer outpatients' unmet needs, including patients attending public and private cancer services.
- 3.5 The number of participating cancer services should reflect power calculations and size required to determine the impact of the intervention.
- 3.6 The Program excludes cancer inpatients and children under 17 years of age.
- 3.7 The Program will address clinical variation in screening for distress, the 6th vital sign.
- 3.8 The Program intervention should be designed around rapid (ie short measure) screening/monitoring for distress to limit patient burden.
- 3.9 The Program requires the inclusion of standardised screening tools and outcomes measures that have strong psychometrics. Tools with high sensitivity and high specificity are required.
- 3.10 Mandatory patient reported outcome measures include: HADS and FACT-G.
- 3.11 The inclusion of a patient problem check list at the time of screening is recommended, such as the list included in the Distress Thermometer.
- 3.12 Pain and symptom (e.g. nausea) screening tools should have good psychometric properties and have the following characteristics:
 - Detect symptoms that occur most frequently, and of note pain must always be included;
 - Detect symptoms that are the most distressing;
 - Be brief, completed in under 5 minutes;
 - Be easy to understand and complete through patient self report;
 - Be easy to process;
 - Provide enough information for triage and decision making;
 - Can be administered via computer technology.
- 3.13 Examples of rigorously validated instruments that may be appropriate for screening of physical symptoms in a generic cancer population include the Edmonton Symptom Assessment System (ESAS), the M.D. Anderson Symptom Inventory (MDASI), the Memorial Symptom Assessment Symptom Assessment Scale (MSAS) and the Symptom Distress Scale. Further details will be released on the Cancer Institute NSW website with the call for applications on 1 March 2010.
- 3.14 Distress screening referral pathways should be developed for participating cancer services based on the Clinical Practice Guidelines for the Psychosocial Care of Adults with Cancer (available at <http://www.nhmrc.gov.au/publications/synopses/cp90syn.htm> - Chapter 4).
- 3.15 Referral pathways should include internal and external referral options, including for example, referral to primary health care professionals who provide services for patients with chronic and complex conditions under Medicare Plus and to the Cancer Helpline ph: 13 11 20.
- 3.16 Applicants should consider patient consent.
- 3.17 Applicants should consider a governance structure and a stakeholder communication strategy that will support Program implementation and evaluation.
- 3.18 Applicants should consider the best way to support the intervention including: hospital IT support and/or inclusion of a Help Desk to resolve computer related screening issues; how to provide screening results to the clinical team and presentation of results to busy clinicians (such as the use of graphs) on a regular basis.

- 3.19 Applications must consider best evidence supportive care interventions, to be identified via a literature review and promoted in the intervention.
- 3.20 Applications should consider program sustainability.
- 3.21 Applications must be submitted by a University or Research Institution in NSW and consist of a team, group or consortia, and lead investigators with a demonstrated track record in health services research appropriate to the application and a clinician who is a clinical cancer care provider or clinical service administrator/manager. The inclusion of additional team members such as NSW healthcare professionals, health economists, biostatisticians, policy makers, and supportive care / health researchers is encouraged. It is not necessary to demonstrate that the proposed team has a history of working together, however they will need to show how the proposed collaborators intend to work together to ensure a cohesive and productive working partnership.
- 3.22 Successful applicants will be expected to enter into a formal arrangement with participating sites.
- 3.23 The Supportive Care Intervention Program funding period is for 3 – 4 years.
- 3.24 The value of the funding is \$3,000,000. Funds will commence in July 2010 and may be used for project salaries (not available for investigator salaries), equipment, travel, dissemination, consumables and PhD scholarships and/or Postdoctoral salaries.
- 3.25 The Supportive Care Intervention Program *Frequently Asked Questions* (available at http://www.cancerinstitute.org.au/cancer_inst/grants/) provides additional detail and replaces the Supportive Care Intervention Program Information Paper.

4. OBJECTIVES

Cancer Institute NSW Supportive Care Intervention Program has been designed to:

- 4.1 Build the evidence base in cancer outpatient supportive care and quality of life through a robust supportive care intervention and evaluation, which involves routine distress screening (case finding/detection and monitoring) via computer touch screens and integrated supportive care including effective consultation and referral, treatment, tailored patient information, the use of question prompt lists and staff training, including training for external psycho-oncology staff to demystify cancer to support referral;
- 4.2 Identify what type of patients benefit the most from the Intervention (e.g. patients with different levels of distress, at different disease stage) and understand the full impact of the Intervention including its impact on the cancer service;
- 4.3 Support timely and appropriate referral to best evidence based interventions;
- 4.4 Provide cancer outpatients with timely, credible, evidence based information, tailored to needs;
- 4.5 Address unmet patient needs identified in the 2007 – 2009 NSW Cancer Patient Satisfaction Surveys and reduce clinical variation related to distress screening and supportive care referral in NSW cancer outpatient services;
- 4.6 Encourage distress screening programs to use standardised tools with strong psychometrics;
- 4.7 Improve cancer outpatients quality of life;
- 4.8 Identify economic efficiencies and effectiveness related to the Intervention Program.

5. ELIGIBILITY**5.1 Administering Institution Eligibility**

- 5.1.1 Applications will only be accepted where the program intervention and evaluation will be conducted under the auspices of a University or major Research Institution (Administering Institution) located within NSW.
- 5.1.2 The Administering Institution must have in place policies and procedures for the management of public funds; for the management of Intellectual Property; for the proper conduct of research in relation to ethics and good scientific practice, and will provide appropriate infrastructure support to allow the Program to be completed.
- 5.1.3 Must be registered with the Cancer Institute NSW and hold a valid Administering Institution Contact ID Number (AIC). AIC Registration Forms and contact details for existing AIC's are available at http://www.cancerinstitute.org.au/cancer_inst/grants/aic.html
- 5.1.4 The institution must provide a supportive environment for the Intervention Program in terms of infrastructure, track record of international competitiveness, and mentoring opportunities for the applicant.
- 5.1.5 A single institution must be nominated as the Administering Institution.

5.2 Applicant Eligibility

- 5.2.1 Applicants may be located at one or more institutions in NSW.
- 5.2.2 Applicants will hold relevant professional qualifications.
- 5.2.3 Applicants must reside in NSW for the duration of the grant.
- 5.2.4 Non Australian Citizens/Non Permanent Residents are eligible to apply, however, will need to provide proof of permanent residency to the Cancer Institute NSW if the application is successful.
- 5.2.5 Applicants must have the skills, knowledge, and resources necessary to carry out the proposed Program.
- 5.2.6 Each application team must be led by two (2) Co-Chief Investigators and at least one nominated collaborator from each collaborating cancer service must also be named on the application. Additional Investigators and Association Investigators may also be named on the application.

5.3 Co-Chief Investigators (University/Research Institution and Clinical)

- 5.3.1 One Co-Chief Investigator must be employed by a University or major Research Institution in NSW and have a proven academic background in health services research, the other must be a cancer related clinician with a demonstrated track record in health service research relevant to this application.
- 5.3.2 Must have the skills, knowledge, and access to the resources necessary to carry out the proposed Intervention Program and evaluation.
- 5.3.3 All obligations regarding previously funded projects involving the applicants must have been fulfilled to the satisfaction of the Cancer Institute NSW. Such obligations include the provision of satisfactory financial, progress and final reports.

5.4 **Other Investigators**

- 5.4.1 Must demonstrate a track record in supportive care or health service research relevant to this application.
- 5.4.2 Must have the skills, knowledge, and resources necessary to carry out the proposed Intervention Program.
- 5.4.3 All obligations regarding previously funded projects involving the applicants must have been fulfilled to the satisfaction of the Cancer Institute NSW. Such obligations include the provision of satisfactory progress and final reports.
- 5.4.4 Cancer Service collaborators must be currently employed in cancer care services in either the public or private system in NSW and deliver cancer health care services or responsible for delivering services related to prevention or screening of cancer.

5.5 **Clinical institutions**

The Clinical Institutions in which the study is implemented and evaluated (including control sites) may include both public and private cancer facilities.

- 5.5.1 Must demonstrate full support of the Program to fully implement the service wide package of supportive care screening, monitoring, referral, intervention and evaluation initiatives detailed in the Cancer Supportive Care Intervention Program, and sign off by the Chief Executive.
- 5.5.2 Must demonstrate that it has the capacity to sustain service wide changed practices in supportive care beyond the tenure of the Cancer Supportive Care Intervention Program if results are positive for patients and the Cancer Institute NSW supports and leads State adoption of evidence.

6. **SELECTION CRITERIA**

In awarding the Supportive Care Intervention Program funds to one consortium, the following criteria will be taken into account:

6.1 **Significance of the Program (15%)**

Demonstrated significance of the proposed Intervention Program and its likelihood to substantially improve cancer outpatients' unmet supportive care needs in NSW and improve quality of life.

6.2 **Sustainability and Translational capacity (25%)**

Ability to sustain the intervention and to translate findings to other cancer outpatient settings in NSW cancer services, including private services, beyond the Program funding period.

An appropriate critical appraisal of the ability of the intervention to be sustained and translated to other cancer settings (including private facilities) should be provided by the applicant as well as an effective strategy for the dissemination of results.

6.3 **Collaboration, Partnerships and Governance Model (10%)**

Ability to collaborate and to partner with cancer services. An appropriate governance structure to support Program implementation and evaluation.

6.4 **Track Record of Investigators (25%)**

Track record of investigators relevant to health services research / supportive care research, health service economics and/or an applied health service background, based on demonstrated expertise and experience, peer reviewed publications and research funding obtained in the last 5 years.

6.5 **Appropriate Program Intervention and Evaluation Methodology (25%)**

An appropriate program of work including feasible intervention designs, methodology, governance, phasing, milestones, process for monitoring Program progress, evaluation of Program impact and any improvements in patient outcomes and health care delivery. The methodology should enable adequate and appropriate measurement of improvements in cancer supportive care delivery over the period of the funding. This could include improvements in: patient outcomes; staff skills and knowledge and service; and efficiency and effectiveness. The methodology should also identify how the cost and economic benefits of the major deliverables will be determined. It is important to include evidence of how the proposed collaborators intend to work together to ensure a cohesive and productive working partnership.

7. REVIEW CONSIDERATIONS

- 7.1 Upon receipt, applications will be reviewed for completeness and for eligibility by the Grants Secretariat. *Late, incomplete or ineligible applications will not be accepted.*
- 7.2 The independent, interstate Cancer Institute NSW Grants Review Committee will score and rank applications based on:
- An assessment of merit against the stated selection criteria.
 - Consideration of independent assessor or referee reports if required.
- 7.3 Applications may be reviewed by appropriate independent assessors.
- 7.4 Recommendations for the award of the Supportive Care Intervention Program funding will then be made by the Grants Review Committee to the Board of the Cancer Institute NSW.
- 7.5 The lodging of an application does not confer any entitlement upon the applicant.
- 7.6 The making of a recommendation is totally within the discretion of the Cancer Institute NSW.
- 7.7 The Grants Review Committee requires its members and independent assessors to declare conflicts of interest and to withdraw from considering applications where such conflict exists.

8. ADMINISTERING INSTITUTION RESPONSIBILITIES

- 8.1 The Administering Institution is responsible for the administration of the funds in accordance with the executed agreement and accepts financial responsibility.
- 8.2 Payment of the funds will be made to the Administering Institution in accordance with the payment schedule in the executed agreement. Funds may only be used for the purposes as detailed in the application and approved by the Cancer Institute NSW.
- 8.3 It is expected that the grant will also be supported within the respective Actual Institution(s).
- 8.4 It is the responsibility of the Administering Institution to ensure that appropriate ethical clearances are obtained before any grant commences.
- 8.5 These Awards may be regarded as a “taxable supply” and therefore a Goods and Services Tax may be payable. The Award will be increased by 10% and the Administering Institution will be required to collaborate in the recovery of the GST component. The written agreement with the Cancer Institute NSW will therefore include the following clauses:
- *To the extent that the Supplier is liable to pay GST in connection with services supplied under this Agreement, the fees specified in this Agreement are inclusive of GST.*
 - *The Supplier will forward their Australian Business Number ("ABN") to Cancer Institute NSW at the commencement of the Agreement. Where no ABN is supplied, Cancer Institute*

NSW will withhold from any payments an amount of 48.5% in accordance with GST legislation unless appropriate documentation is provided.

- 8.6 For the purposes of payments under this agreement, the Supplier (the Administering Institution is the Supplier) may be required to provide invoices to the Cancer Institute NSW in the form of a GST Tax Invoice as prescribed in the GST legislation.

9. PERMITTED USE OF SUPPORTIVE CARE INTERVENTION PROGRAM FUNDS

- 9.1 The purpose of the funds is to implement and evaluate the Supportive Care Intervention Program in participating cancer services. **Funding can be used to** support infrastructure (including technologies e.g. touch screens, software / tool licences for use in distress screening); staff training; Program staff salaries; Program team travel to sites; conference dissemination; postgraduate scholarships and postdoctoral salaries and consumables.
- 9.2 Funds awarded shall not be used for any named Investigator salaries.
- 9.3 The Administering Institution must administer the funds and ensure appropriate infrastructure and support is provided to the applicant(s). The applicant(s) is(are) responsible for negotiating the use of the funds with the Administering Institution. All funds must be spent on the direct support of the applicants(s) and the Supportive Care Intervention Program.
- 9.4 Funds awarded shall not be used for any purpose associated with overhead infrastructure costs (i.e. institutional overheads or administrative levies).

10. CANCER INSTITUTE NSW POLICY DOCUMENTS

10.1 *Grants Administration Policy*

The Grants Administration Policy may assist those who are considering applying for, and those who hold, Cancer Institute NSW competitive grant support. It provides advice on eligibility and selection criteria, the application process, appeals, complaints, FOI, deeds of agreement, funding, monitoring and reporting and other specific policy issues.

10.2 *Grants Peer Review Policy*

The Grants Peer Review Policy provides information about the policies and governance arrangements for the peer review of competitive grant applications and the ongoing monitoring of the progress of competitive grant projects and activities.

These Policy Documents can be found at: http://www.cancerinstitute.org.au/cancer_inst/grants/policies.

11 REPORTING REQUIREMENTS

- 11.1 Recipients will be required to submit **Progress Reports** at the end of each calendar year (or part thereof), or as stipulated in the executed agreement schedule, that includes information on the progress made in the Grant.
- 11.2 **Progress Reports** must be submitted to the Grants Secretariat by 31st August following the end of each financial year (or part thereof). Report proformas are available at http://www.cancerinstitute.org.au/cancer_inst/grants/reporting.html
- 11.3 The Grants Review Committee reserves the right to recommend the suspension of a grant if progress is unsatisfactory.
- 11.4 Recipients will be required to submit **Financial Reports** at the end of each financial year that includes information on the expenditure of funds in relation to the Grant.

- 11.5 **Financial Reports** must be submitted to the Grants Secretariat by 31st July following the end of each financial year. Report proformas are available at http://www.cancerinstitute.org.au/cancer_inst/grants/reporting.html
- 11.6 The Grants Review Committee reserves the right to recommend the suspension of a grant if expenditure of funds is not consistent with the terms in the funding agreement.
- 11.7 Where a Grant recipient fails to submit satisfactory reports, as required, the Cancer Institute NSW may determine that funds have not been used in accordance with conditions applicable to the Grant, and that all or part of Grant must be repaid. In this case, the Cancer Institute NSW may withhold the remainder of the Grant payments for the current year or initiate recovery of the Grant money.
- 11.8 Recipients may be required to participate in and present at forum(s) at the request of the Cancer Institute NSW.
- 11.9 Recipients are required to be involved in site visits at participating Program cancer services, to be attended also by Cancer Institute NSW staff and/or members of the NSW Grants Review Committee.

12 SITE VISIT/AUDIT

A suitable time will be negotiated with investigators and sites, to support site visits by staff from the Cancer Institute and/or members of the independent Grant Review Committee, half way through the Program.

13 ACKNOWLEDGEMENT OF SUPPORT

- 13.1 All publications, media releases or discussion of results from grants carried out with the assistance of a Cancer Institute NSW Grant must acknowledge the support of the Cancer Institute NSW.
- 13.2 Grantees must indicate their status as recipients of Cancer Institute NSW Grant support in scientific publications and programs of scientific meetings and in any other public connection.

14 PRIVACY AND CONFIDENTIALITY

- 14.1 Documents containing personal information will be handled and protected in accordance with the provisions of the Privacy and Personal Information Protection Act 1998. Personal information would be disclosed only with permission of the individual to whom it relates or where the Act allows.
- 14.2 Applicants consent to the information supplied as part of their application being disclosed for the purposes of the assessment of their application and for purposes connected with the making and administration of the Grant. Such disclosure includes, but is not limited to, disclosure to members of the Grants Review Committee, independent readers/assessors requested by the Committee to provide advice, and relevant employees of the Cancer Institute NSW and Government involved in the Grant process.
- 14.3 Applicants acknowledge that announcement of the successful applicant from this grant round will involve the dissemination of information to the public about the general nature of the grant funded including the lay description provided in the application, the funding awarded, the applicants involved in the grant, and the administering institution and any actual organisations at which the grant is being carried out.
- 14.4 Information contained in applications will be regarded as confidential.

CLOSING DATE: 9 APRIL 2010

15 INTELLECTUAL PROPERTY

Any claims for ownership and /or associated rights for IP generated under the Supportive Care Intervention Program will be negotiated with the successful applicants prior to entering into an agreement. However, the Cancer Institute NSW will require, at a minimum, exclusive rights in relation to material created for use in the Program.

16 CONFLICT OF INTEREST

All parties involved in or associated with Cancer Institute NSW funded proposals/projects are required to disclose to the Cancer Institute NSW, any conflict of interest which has the potential to influence, or appear to influence, the project and activities, publications and media reports, or requests for funding related to the proposal/project. Such conflicts must be disclosed to the Cancer Institute NSW at the time of the submission of a proposal, and in reporting on Cancer Institute NSW funded grants as soon as practicable after the conflict of interest is identified.

17 FUNDING AGREEMENT

- 17.1 All parties involved in a Proposal should familiarise themselves with the standard Funding Agreement (available at www.cancerinstitute.org.au), but only the Administering Institution and the Cancer Institute NSW will be parties to the Funding Agreement. Parties involved in a funded project must accept the terms of the Funding Agreement and the Administering Institution must sign the Funding Agreement before payments commence.
- 17.2 Projects must commence as required by the Funding Agreement. Failure to do so may result in termination of the Funding Agreement.
- 17.3 Administering Institutions should note that the Funding Agreement covers post-award management, including reporting requirements and financial management. The standard Funding Agreement can be viewed on the Cancer Institute NSW's Web Site.

18. VARIATIONS TO THE FUNDING AGREEMENT

Requests to vary the Funding Agreement must be forwarded in writing by the Administering Institution to the Cancer Institute NSW. Forms are available on the Cancer Institute NSW's Web Site. Amendment of any clauses of the Funding Agreement will be at the Cancer Institute NSW's absolute discretion.

19. TIMEFRAME

Action	Date
Applications Open	1 March 2010
Applications close	9 April 2010
Expected Date of Commencement	1 July 2010

20. SUBMISSION PROCEDURES**20.1 How to Apply**

Applicants must use the Cancer Institute NSW Supportive Care Intervention Program Application Form. This is an Adobe PDF Form, which will be available from the Cancer Institute NSW web at: http://www.cancerinstitute.org.au/cancer_inst/grants/

20.2 **Electronic Copy**

20.2.1 The Application Form must be submitted via the Adobe PDF form for the grant type via the Submit Button within the Application Form.

20.2.2 The Application forms require the use of **Adobe Acrobat Reader version 8.1.1** or above. The latest version of Adobe Acrobat Reader can be downloaded free of charge at <http://get.adobe.com/reader/>

20.2.3 Signatures are not required on the electronic version of the application.

20.2.4 You must save the PDF Form with the following naming convention:

GRANT CODE_1st applicant's surname e.g. **SCI_Smith**

20.3 **Submission Date**

Applicants must submit **BOTH** electronic and hard copies of the application (electronic and hard copies must be identical) to the Cancer Institute NSW by 5pm on 9 April 2010. Late applications will be considered ineligible.

20.4 **Hard Copy**

10 hard copies (1 original plus 9 copies) double sided, stapled on top left hand corner of the application should be lodged with the Grants Secretariat.

Hard copies should be sent to:

Courier address

Grants Secretariat
Cancer Institute NSW
Australian Technology Park
Biomedical Building
Suite 101, 1 Central Avenue
EVELEIGH NSW 2015

OR

Mail Address

Grants Secretariat
Cancer Institute NSW
PO Box 41
ALEXANDRIA NSW 1435

21. **ENQUIRIES**

Enquiries about Cancer Institute NSW Grants can be directed to the Grants Secretariat at grants.secretariat@cancerinstitute.org.au or on 02 8374 3530/5644