

## Research Application Form to Oral Health Victoria (OHV) Research and Evaluation Strategy Committee

Please return completed application via email to RESC@dhsv.org.au

Project title  Principal investigator (PI) details  Project Aim & Other:    Phone:   Email:					
(PI) details  OHV RDHM UoM Other:  Phone:  Email:  Project Aim & Description (maximum 500 words)  Which DHSV research priority does the project align with (Tick one or more)?  Health policy and systems research to maximise value (Lead)  How does it align to the research priority or priorities? (maximum 500 words)  Financial funding for project  Outline resources/support required from DHSV/RDHM (maximum 500 words)	Project title				
Other:		lame: Organisation:			
Phone: Email:  Project Aim & Description (maximum 500 words)  Which DHSV research priority does the project align with (Tick one or more)?  How does it align to the research priority or priorities? (maximum 500 words)  Financial funding for project (maximum 500 words)  Punding source: \$  Outline resources/support required from DHSV/RDHM (maximum 500 words)  Email:  World-class, patient-centred care with a focus on prevention and early intervention (Care)  Population oral health initiatives to support health equity (Empower)  Health policy and systems research to maximise value (Lead)  Funding source: \$  Outline resources/support required from DHSV/RDHM (maximum 500 words)	(PI) details		OHV	RDHM	UoM
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more)?  Population oral health initiatives to support health equity (Empower)  Health policy and systems research to maximise value (Lead)  How does it align to the research priority or priorities? (maximum 500 words)  Financial funding for project  Support Funding source:  \$  Outline resources/support required from DHSV/RDHM (maximum 500 words)	priority does the project align with (Tick one or	l · · · · · · · · · · · · · · · · · · ·			
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Outline resources/support required from DHSV/RDHM (maximum 500 words)	research priority or priorities?				
Outline resources/support required from DHSV/RDHM (maximum 500 words)	_	Funding source:			
resources/support required from DHSV/RDHM (maximum 500 words)		\$			
PI Signature: Date:	resources/support required from DHSV/RDHM				
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OHV Office use only						
RESC Committee Decision:	Endorsed N	Not Endorsed				
RESC Chair Name:	Signature:	Date:				