

Milestone report: final report (Indigenous Health Award & Walpole Grieve Award)

Form Preview

Grantholder details

* indicates a required field

Grantholder name *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Grantholder email *

Must be an email address.

Grant awarded *

Year of award *

Must be a number.

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* indicates a required field

Project details

Project/activity start date *

Must be a date.

Project/activity end date *

Must be a date.

Please provide an overview/summary of the project, activities or educational opportunities funded by the award *

Word count:

Must be no more than 250 words.

Implications & reflections

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What were the main outcomes or learnings from the project, activities or educational opportunities? *

Word count:

Must be no more than 250 words.

How do you anticipate these outcomes or learnings will benefit general practice and patient outcomes? *

Word count:

Must be no more than 250 words.

How has the experience benefited you and your education, training, career and/or clinical practice? *

Word count:

Must be no more than 250 words.

If the award supported any undergraduate, postgraduate or other studies, please provide the details here.

How important was the financial support you received from the RACGP Foundation? *

Word count:

Must be no more than 250 words.

Academic output

Provide details of any publications, presentations or other ways that the outcomes or learnings have been, or are likely to be, disseminated as a result of this award.

Please indicate if they have been published, are in press, submitted or in preparation.

Feedback

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Please share any other comments, feedback or suggestions you may have in relation to RACGP Foundation's grants and awards program.

Photos

Please provide any relevant photos of your project, activities or educational opportunities in JPEG format. These may be used by the RACGP Foundation for publicity and promotional purposes.

Attach a file:

A maximum of 3 files may be attached.

If your photos contain images of other people, please ensure you have permission from them to share these photos with us prior to submitting.

Expense acquittal

* indicates a required field

Grant income

What was the total grant amount you received? *

\$

Must be a dollar amount.

Excl. GST.

Grant expenditure

Please provide a breakdown of expenditure (excl. GST). Note that any unspent grant funds must be returned to the RACGP within 14 days of submitting this report.

Expenditure	\$
<input type="text"/>	\$ <input type="text"/>

Total expenditure amount *

\$

This number/amount is calculated.

Please attach any supporting documentation, e.g. invoices/receipts.

Attach a file:

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Declaration

Grantholder declaration *

I confirm that the information contained in this acquittal is an accurate and correct record, and that all funds were expended in accordance with the Grant Agreement

Grantholder name *

Title First Name Last Name

Consent

* indicates a required field

The RACGP Foundation may use the responses and any images you have provided in this form to promote your project/activities, the grant program through which your project is being funded, and/or the activities and impact of the RACGP Foundation as the philanthropic arm of the RACGP. It may do so using RACGP's various communications channels, including but not limited to social media and the RACGP and RACGP Foundation websites.

Submitting this form indicates your consent to the above.

Please indicate you have understood and accept that the responses you have provided may be used by the RACGP Foundation for the purposes outlined above

I understand and accept

Feedback (optional)

We value your feedback!

To continuously improve the RACGP Foundation's research grants and awards program, ensuring it best meets the needs and expectations of researchers in the field of general practice, we invite you to participate in this brief survey.

Were you able to locate this milestone reporting form easily?

Yes No Neutral

Did you find the form easy to understand and navigate?

Yes No Neutral

Were the questions on the form clear and concise?

Yes No Neutral

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Did you feel that the form adequately covered the necessary areas to showcase the outcomes of activities funded by the grant?

Yes

No

Neutral

Did you find the amount of time required to complete the form reasonable?

Yes

No

Neutral

Do you have any suggestions for improving this milestone reporting form?