

The C Y O'Connor ERADE Village Foundation Incorporated

INNOVATION GRANTS

Application Form

The Applicant(s): State the legal name and address of the applicant, including ABN, ACN if relevant.

Person(s) associated with the application. State the full names and addresses and persons associated with the application. Qualifications and CVs to be attached.

Project Description (500 words). Should include an indication of the value of potential outcomes of the project.

Onsite facilities requested. Number of persons for whom workspace is required. Laboratory access etc. Access to offsite facilities (including farm areas and farm animals).

Living accommodation sought (if required). Number of persons, family members.

Signed _____ Name _____ Date _____

The completed application should be submitted to:

The C Y O'Connor ERADE Village Foundation Incorporated
PO Box 1
North Dandalup WA 6207
Australia

Or to: j.valenzuela@cyo.edu.au