

JAMIESON TRAUMA INSTITUTE



Jamieson Trauma Institute Cliff Pollard Award Application Form

Γitle:
First Name:
Last Name:
Phone number:
Email:
Position:
Department:
Discipline:
Project title:
Please outline your project methodology:



What impact will your project have on trauma care in Queensland?	
Please outline what resources are required in the delivery of your project:	
riease outline what resources are required in the delivery of your project.	

What potential risk could occur with this project?	
Please explain how your project aligns with the remit of Jamieson Trauma Institute:	

Does this project engage with consumers and why? If so, how?		
By submitting this applicate Award Guidelines.	ion, you agree to the terms and conditions listed within the Cliff Pollard	
Evidence of implementation	n.	
Short biography of applica	nt attached	
Completed budget templa	te attached	
Your application should be (Jamieson_Trauma_Institu	e emailed through to the Jamieson Trauma Institute ute@health.qld.gov.au)	
Applications close at 11:59	9pm on Monday 28 November 2022.	
Those interested in applying Trauma Institute.	ng are welcome to discuss their application in advance with the Jamieson	
Contact: Jamieson Trauma Institute Jamieson_Trauma_Institute Phone: (07) 3346 1614		