

Collaboration & Exchange Award

Progress Report & Expenditure Acquittal

Due within 30 days of Award completion

**Important:**

* Heart Foundation Collaboration & Exchange Award recipients must submit this joint Progress Report & Expenditure Acquittal Form within 30 days of the Award’s completion date. Failure to submit this document may jeopardise any future funding applications.
* Please submit form by email to research@heartfoundation.org.au.

**Privacy Statement:**

The Heart Foundation respects your privacy and embraces the principles contained in the Privacy Act. The Heart Foundation is the National Heart Foundation of Australia and all associated Australian State and Territory Heart Foundation Divisions, full details of which can be found in our Privacy Notice. The information collected on this form will only be used for the purposes of administering the award. Personal details may be provided to third parties where required by law or for the purpose of facilitating services contracted by us, in so doing your personal information may be disclosed to overseas recipients. The Heart Foundation will not disclose your information to any third party for their marketing purposes.

If you have any questions about privacy please contact the Research team at Level 2, 850 Collins Street, Docklands VIC 3008, research@heartfoundation.org.au or by calling (03) 9321 1581. Our APP privacy policy is set out in our Privacy Notice and details how you may complain about privacy issues and how we would deal with that complaint. It also explains how you can access, correct or update information we hold about you. A copy of our Privacy Notice is available at [www.heartfoundation.org.au o](http://www.heartfoundation.org.au/)r on request. [HFPSB022-150923]

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| 1. **Award Details** | |
| **Name of Institution** | Click here to enter text. |
| **Name of Awardee** | Click here to enter text. |
| **Name of Award** | Click here to enter text. |
| **Award ID** | Click here to enter text. |
| **Total Award Value** | Click here to enter text. |

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| 1. **Summary of Activities** |
| Please summarise the activities undertaken as a result of your collaboration and exchange award, with a focus on the outcomes, expected outcomes and the impact of these activities to your work. |
| Click here to enter text. |

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| 1. **Financial Acquittal** | |
| Please provide a list of expenditure associated with your collaboration and exchange activity. Only expenditure for which evidence can be provided will be accepted. Evidence must be attached at **Item 4.** | |
| Click here to enter text. | $ Click here to enter text. |
| Click here to enter text. | $ Click here to enter text. |
| Click here to enter text. | $ Click here to enter text. |
| Click here to enter text. | $ Click here to enter text. |
| Click here to enter text. | $ Click here to enter text. |
| **A. Amount Expended** (sum of all previous rows) | $ Click here to enter text. |
| **B. Value of Award** (provided in your letter of award) | $ Click here to enter text. |
| **C. Total Acquitted** (B minus A)  Note: any remaining funds must be returned to the Heart Foundation. Please contact the Heart Foundation Research Program for further instructions. | $ Click here to enter text. |

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| 1. **Evidence of Expenditure** |
| Please attach evidence (tax invoices and receipts) of expenditure at the end of this form. |

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| 1. **Signatures** |
| We certify that all details given in the application are correct and we agree to continue carrying out the project in accordance with the Heart Foundation’s current Funding Deeds for Scholarships and in accordance with the principles of the Australian Code for the Responsible Conduct of Research (2018). We acknowledge that all supporting documents have been provided and understand that our request will not be eligible for consideration by the Heart Foundation if incomplete. |

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| **Awardee** | | |
| **Title:** Click here to enter text. | **First Name:** Click here to enter text. | **Surname:** Click here to enter text. |
| **Signature:** | | **Date:** Click here to enter a date |

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| **Primary Supervisor (if applicable)** | | |
| **Title:** Click here to enter text. | **First Name:** Click here to enter text. | **Surname:** Click here to enter text. |
| **Signature:** | | **Date:** Click here to enter a date |

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| **Research Administrative Officer** | | | |
| **Title:** Click here to enter text. | **First Name:** Click here to enter text. | | **Surname:** Click here to enter text. |
| **Email:** Click here to enter text. | | | **Telephone:** Click here to enter text. |
| **Institution:** Click here to enter text. | | | |
| **Position:** Click here to enter text. | | **Department:** Click here to enter text. | |
| **Signature:** | | | **Date:** Click here to enter a date |