

Application for Research at the Selwyn Foundation

Please tick each box as you complete the information.	
Researcher	
Name:	
Institution:	
Research Objective:	
How does this research contribute to Ageing Well?	
How does this research compliment the Mission of The Selwyn Foundation?	
Location of research:	
Participants:	
Expected start date of research:	
Expected completion date:	
In your view, what operational impact could this research have at The Selwyn Foundation?	
Is this research project compliant with Privacy Act and Health Information Acts? Yes No	
Does this research require an agreement between the researcher and Selwyn? Yes No (For example, a confidentiality agreement)	
Please indicate which documents are attached to your application:	
Add ethics approval	
Add participant information sheets	
Add consent forms	

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Current practicing certificate (if researcher is a health professional)
Who is the sponsoring General Manager within The Selwyn Foundation?
Summary:
Before you send this application please check you have included the following:
 Researcher and research details Supporting documentation (attached to this application form) Signed application and date of signature
I declare the above information is true and accurate:
Signed: Date:
Name:
Attach any supporting documents to this application and send to:
The Selwyn Institute for Ageing and Spirituality
Group Office, P.O. Box 8203, Symonds St, Auckland 1150
To request an application form or to send your application by email, please contact selwyn.institute@selwynfoundation.org.nz
For further enquiries about Research at Selwyn please contact: Hilda Johnson-Bogaerts Director, The Selwyn Institute for Ageing and Spirituality Group Office, P.O. Box 8203, Symonds St, Auckland 1150
hilda.johnson@selwyfoundation.org.nz or phone: 09 849 9203
FOR OFFICE USE ONLY
Date Received:
Comment:
Approved/Declined:

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