**APPLICATION FOR A**

**MOE-CONTRACTED GRANT FORM**

Note: This application form should be submitted together with all other prescribed forms and to be uploaded into ROMS.

|  |  |  |
| --- | --- | --- |
| 1. **ADMINISTRATIVE DETAILS** | | |
|  | **Principal Investigator** |  |
|  | **Project Title** |  |
|  | **Category of Project** | |  |  | | --- | --- | | Research | Development | |
|  | **Type of Review** | Select category |
|  | **Project Budget** | $Enter budget |
|  | **Tier** | Select Tier |

|  |  |  |
| --- | --- | --- |
| 1. **CONTRACTING DIVISION** | | |
|  | **MOE Division/Branch** |  |
|  | **Name of MOE**  **Project Manager** |  |
|  | **Appointment** |  |
|  | **Telephone number** |  |
|  | **Email address** |  |

|  |
| --- |
| 1. **CASE FOR SUPPORT FROM MOE CONTRACTING DIVISION** |
| Specify the following:   * Purpose of Study * Relevance to MOE/Division Goals and Directions and Its Potential Impact * Related Studies Conducted within MOE * Application of Findings to MOE/Division Plans/Programmes * Dissemination and Communication of Findings |
|  |

|  |  |  |
| --- | --- | --- |
| **Project Team** | **Appointment** | **Name** |
| **Principal Investigator** |  |  |
| **MOE Contracting Division Director** |  |  |
| **MOE Project Manager** |  |  |