

# APPLICANT RESPONSE TEMPLATE

## Section 1 – Applicant Details

FULL NAME OF APPLICANT/S – Primary Contact / Consortium Lead: \_\_\_\_\_

TRADING AS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

ABN: \_\_\_\_\_ ACN: \_\_\_\_\_

### DECLARATION OF TENDERER

The undersigned hereby:

- States that the Applicant complies fully to all the laws of the State of South Australia and the Commonwealth of Australia;
- Declares that its response to this Request is made in good faith, based on true and correct information, with the capacity and intent to complete the prospective contract without any need for variation;
- Understands and agrees to all conditions including, without limitation, obligations and acknowledgement included in the Request.
- Seeks to provide the services as described below, at the price stated; and

DATED THIS \_\_\_ / \_\_\_ / \_\_\_

SIGNATURE: \_\_\_\_\_

NAME AND OFFICIAL POSITION HELD: \_\_\_\_\_

Duly authorised to sign tenders for and on behalf of: \_\_\_\_\_

## Section 2 – Statement of Compliance

The Applicant:

- Agrees to be bound by the terms and conditions of the Request; and
- Accepts the terms and conditions referred to in the Request for the services specified, and will enter into this Agreement in the event of its submission being accepted.

In the event that the Applicant does not agree to any of the terms and conditions of either the Request, it is to provide a list of all non-compliances in the following table.

Reference	Term or Condition	Comments on why it cannot comply	Suggested Amendment(s)

It is noted that any non-compliance may exclude consideration of the Applicant's submission.

### CONFLICT OF INTEREST

Provide details of any potential conflicts of interest involving the Applicant/s. In addition, describe the Applicant/s's internal measures, if any, for resolving any conflict of interest that may arise.

Conflicts of interest	
Details of any potential conflicts of interest	
Procedures for identifying and Resolving conflicts of interest	

DATED THIS \_\_\_ / \_\_\_ / \_\_\_

SIGNATURE: \_\_\_\_\_

NAME AND OFFICIAL POSITION HELD: \_\_\_\_\_

Duly authorised to sign tenders for and on behalf of: \_\_\_\_\_

## Section 3 – Group Participants

For each research group participant please provide the following information, as far as is applicable:

1. Company Name, Partnership Name or names of individuals as applies
2. Trading names
3. Australian Business Numbers (ABNs)
4. Australian Company Numbers (ACNs)
5. Site Address (principal place of business)
6. Postal address (principal place of business)
7. Contract administration contact name, telephone number and email address
8. Description of the organisation's responsibilities in the research group .
9. Any projected funding amount to be allocated to the organisation, ex GST for each financial year, and the projected outputs for this funding.
10. For each proposed partner organisation, please attached written confirmation of their readiness to participate. The letter should confirm their projected scope of participation, the funding amount allocated and their proposed outputs. This letter should be signed by an executive officer or a staff member with suitable responsibility to enter into sub-contracting arrangements. It should also include confirmation that the organisation has appropriate insurances.

## Section 4 – Referees

Please provide details for two referees who can comment on your capability, expertise, and capacity to implement the proposed project.

### Referee 1

Name:

Position:

Working relationship to the respondent:

Address:

Contact number:

Email address:

### Referee 2

Name:

Position:

Working relationship to the respondent:

Address:

Contact number:

Email address:

## Section 5 – Operating Budget

Please use the following budget template as a guide to outline your estimated project expenses. Please add additional items where necessary and remove any cost that is not relevant to your project.

<b>EXPENDITURE</b>			
Staff costs			
	YR 1	YR 2	YR 3
Salary – Position			
Salary – Position			
Salary – Position			
(Please add more rows as required)			
Superannuation			
Workers Compensation			
Annual Leave Loading			
<i>Staff costs sub-total</i>			
<b>Partner organisation funding</b>			
If relevant, please use the section below to indicate the division of funding between consortium partners.			
[Name] partner organisation			
[Name] partner organisation			
[Name] partner organisation			

[Name] partner organisation			
[Name] partner organisation			
[Name] partner organisation			
<i>Partner organisations sub-total</i>			
<b>Other project costs</b>			
Travel			
Technology / IT			
Catering and Meetings			
Office supplies			
Petty cash and sundries			
Insurances			
Participant reimbursement			
Transcription			
Other			
<i>Other project costs sub-total</i>			
<b>TOTAL EXPENDITURE</b>			

## Section 6 – Skills, Experience, Knowledge and Understanding

For each of the bulleted criterion below a 500 word limit applies.

Using specific examples that demonstrate your expertise, please outline your experience and capability to:

- Design and deliver comparable research projects in school environments
- Design and deliver comparable research projects with Aboriginal and Torres Strait Islander communities
- Work within a framework of trust, respect, cultural sensitivity and participation
- Implement the project and deliver specified outcomes within the allocated timeframe
- Communicate key research findings to diverse audiences, including plain language reports to community, education-specific reports to schools and school leaders, and academic analysis for publication
- Manage finances including structures and systems in place to manage the flow of funding

For each of the bulleted criterion below a 500 word limit applies.

If your organisation has relevant experience please address the following criteria. Please feel free to use this section to outline any additional information about your organisation that you feel is relevant to the application.

- Desirable: Proven ability to establish the framework for a longitudinal research project
- Desirable: Proven ability to design the latter stages of a continuing project that can be run efficiently and effectively with minimum input by non-research specialists

## Section 7 – Proposal

Please provide a proposal that:

- Addresses and responds to all the information outlined in the Request for Tender, in particular:
  - Design issues to be considered including scope, methodology and sample design
  - Project timing / Project phases
  - Outputs / Services
  - Key Deliverables
  - Project Plan
  - Risk Management (please use template provided below)
- Proposes a realistic and thorough approach to the project, including identifying research partners.
- Outlines an appropriate research model that takes into consideration the specific complexities of the research context, including confirmation of partner agencies that will form part of the consortium if relevant, the role of each agency and proposed governance structure.
- Includes a risk management plan, which effectively considers and mitigates project risks.

## Risk Management Template

Likelihood and impact measurements: (L) Low (M) Moderate (H) High

Risk name	Raw risk rating	Mitigation Strategy	Residual risk rating
	Likelihood = Impact =	.	
	Likelihood = Impact =		