**Customary Research Proposals  
PHASE 1 APPLICATION FORM**

**Applicant details**

***Guidance Note:***

***Please ensure you complete all relevant parts of this application. Failure to do so may result in MPI being unable to consider your application. MPI may request further information from you, or clarification of any matters included in this form.***

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| 1. **Name of applicant:** |
| 1. **Address:** |
| 1. **Organisation:** |
| 1. **List details of organisations/ forums involved in development of the proposal and describe their involvement, e.g. consulted, supporter(include any MPI involvement):** |
| 1. **Proposed research provider (if relevant, otherwise state none):** |
| 1. **Proposed agents/subcontractors (if any)** |
| 1. **Financial governance and management of research provider.**   Include all financial governance and management details relevant to this project, including accounting, banking, audit and insurance (insurance needs will be assessed on a case by case basis). |

**Project Details**

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| 1. **Project Title:**   Summarise the project into a Project Title. |
| 1. **Project Summary:**   Provide a short summary of the information needed and how the project would obtain that information. (*Refer to section 5.1 in the guidelines and provide explanation of how this project would meet one or more of these objectives*) |
| 1. **Project Deliverables:**   What are the specific deliverables of this project? |
| 1. **Intended use of the research outputs:**   Describe the intended use of the information obtained from the research, including whether it will support the uptake /operation of customary fisheries regulations, an iwi or forum fisheries plan, or fisheries management issues, and how these align with iwi objectives?. |
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| 1. **Information sharing/Intellectual Property (IP):**   Describe any outcomes of the project that could be used, including intellectual property. How will the results be communicated or shared with the supporting tangata whenua? Will the results include/involve intellectual property, sensitive, personal or localised knowledge? Are there are restrictions or conditions you wish to place on the use of Background IP, or IP resulting from the research? |
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| 1. **Timing:**   Are there specific timeframes when work should be undertaken or constraints in regard to when the research outputs are needed by? |
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| 1. **Estimated costs (if known):**   Provide a breakdown of likely costs (if known). Also include any potential contributors including in-kind support. |
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| 1. **Methodology (if known):**   Describe conceptually how the project would be approached, identifying likely challenges and how they would be overcome. |
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| 1. **Skills and expertise of proposed provider (if applicable):**   Describe the qualifications and expertise of the proposed provider |
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| 1. Other   Here you may include any other relevant information to this application that you would like MPI to consider |

**Te Wai Māori Wai Ora Fund:**

The MPI and Te Wai Māori Trust are collaborating to provide benefit to Māori by better aligning MPIs Customary Research Fund and the Wai Ora Fund.

Te Wai Māori Trust established the Wai Ora Fund in 2012. The purpose of the fund is to enable Māori to develop expertise and advance Māori interests in freshwater fisheries through development, research and education.

Funding will be provided to projects that:

* undertake research, development and education to advance Māori interests in freshwater fisheries
* promote the establishment, protection and enhancement of freshwater fisheries and habitat
* bring direct and indirect benefits to Māori in respect of their freshwater fisheries.

If your application is in relation to freshwater fisheries and you would like it considered for the Wai Ora Fund, please tick here.

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| **Conflict of Interest Declaration** | | |
| **I, ………………………….. declare that to my knowledge neither I, nor the applicant organisation, have any actual or potential conflict of interest in relation to the proposal outlined in this application that has not been disclosed to MPI in this application**  **Signed by:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Name:**  **Title/position:**  **Date:** | | |
| **Application Declaration Confirmation** | | |
| **Duly Authorised Agent of the Community of Interest / Applicant Group:** | **Name:** | **Date**: |
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| Further information may be sought as part of the evaluation process. | | |

Once completed, proposals should be emailed to:

customary[research@mpi.govt.nz](mailto:research@mpi.govt.nz)

or posted to: Fisheries Management Team

Ministry for Primary Industries  
PO Box 2526  
Wellington 6140  
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