



Patient Support Group Project Proposal Form*

*Only for use for Patient Support Group (PSG) grant requests (can also request non-financial support). **Form must be completed by the Patient Support Group.** Request will be reviewed by a Grants Review Panel within 25 working days of receipt at Novartis head office.

The completed form should be emailed to UK.Grants@novartis.com.

Please select one as the relevant therapy area for your application:

Oncology/Rare Diseases e.g. TSC

Other

Project title:

Registered name and number of PSG:

If PSG is a charity, registered number in Charities Commission Register:

Submitted by: name & title

In the event that your grant application is successful, if different to above, please provide:

i) Day to day contact overseeing the project:

ii) Authorised signatory to grant agreement:

Patient Group website address and email, phone/fax numbers:

Please indicate the total annual income of the PSG

(to ensure our grant funding does not interfere with PSG independence)

Have you previously received funding from Novartis? (If yes, please provide details)

Total cost of project/activity:

Total amount requested from Novartis

(please indicate if you are requesting non-financial support and is this in addition to or separate from financial support?)

Has this proposal, or a similar request, been submitted to another organisation?

(If yes, please provide details):

Project Objectives:

(Please give brief description of project aims including the educational need for the project and the expected benefit to patients)

Project context, background, supporting evidence:

Resources required from Novartis:

(Please indicate whether applying for a grant or proposing to work with Novartis and any other organisation on a Patient Support Group activity. If the latter, specify roles of all parties)

If the proposal is to work with Novartis, detail any expected material/outputs
(Novartis will approve the materials/output through its internal ABPI Code procedure)

Recommended approach and timescale:

(Please give brief summary of recommended approach to the project, expertise required, how it will be deployed and the expected duration of the project)

Outcomes, success criteria and evaluation - how will success be measured:

(Please describe the expected and desired outcomes in terms of benefits to patients, and the measures to be used to assess whether the project has been successful. Include criteria for the project itself, what quantitative and qualitative measures will be used (if any).