



### PAROS FUNDING STATUS

Total funds received: USD283,000  
 Trial coordinating centre professional and research informatics fees: USD75,642  
 Remaining funds to be disbursed: USD207,358

S/N	Country	Approved grant application ID	Funding disbursement (USD)
1	Indonesia		19,843
2	Philippines		19,843
3	Turkey		11,843
4	China		29,843
5	Malaysia	PAROS/2013/01 dated 26th December 2013	36,300
6	Pakistan		29,843
7	Thailand		29,843
8	Vietnam		10,000
9	Travel funding requests		20,000

### PAROS Funding Request Application

**PAN-ASIAN RESUSCITATION OUTCOMES STUDY FUNDING REQUEST**

**Information about the Lead Investigator**

Name	
Date of birth	
Designation	
Organisation	
Telephone number	
E-mail address	
Country	

**Information about Host Institution**

Organisation Name	
Address	
Main contact person for financial matters	
Designation	
Telephone number	
Fax number	
E-mail address	
Country of Incorporation	
Corporate website	

**AMOUNT OF FUNDING REQUESTED (capped at USD50,000)**

USD\$ \_\_\_\_\_

Disbursement of funds is on a quarterly basis, subject to completion of milestones/deliverables as specified by applicant and approved by the PAROS network.

**Please use Arial font size 10 for all text.**

**1. Justification (limit to 300 words)**

Please justify reason for funding request and what you hope to achieve with this funding (e.g. number of out-of-hospital cardiac arrest cases you expect to collect in a year, implementation of basic comprehensive dispatcher-CPR (DA-CPR) package, number of dispatchers trained to perform DA-CPR, etc.)

**2. Deliverables and Timeline (for 1 year)**

Please describe the deliverables of the project and an approximate timeline for each deliverable (on quarterly basis). E.g. start of project, start of training, start of data collection, number of cases collected, preliminary analysis and report, end of data collection, final report.

E.g.  
 1 Jan 2014 – 31 Jan 2014: start of project


**2. Deliverables and Timeline (for 1 year)**

Please describe the deliverables of the project and an approximate timeline for each deliverable (on quarterly basis). E.g. start of project, start of training, start of data collection, number of cases collected, preliminary analysis and report, end of data collection, final report.

E.g.

1 Jan 2014 – 31 Jan 2014: start of project  
 1 Feb 2014 – 31 Mar 2014: Data collection (100) cases to be collected within this period  
 1 May 2014 – 31 Aug 2014: Data collection (200) cases to be collected within this period

Version 2.0 - 10 February 2014



**3. BUDGET**

- Please provide a detailed budget including a description and justification for each category of expense
- The budget should be in proportion with the amount of work/basic salary.
- Salary support
  - Research fellows, research assistants, clinical coordinators, research nurses, statistician
- Other Operating Expenses
  - Training (e.g. DA-CPR training, etc.)

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- Other Operating Expenses
  - Training (e.g. DA-CPR training, etc.)

S/N	ITEMS	Amount (USD)
1	<b>Description:</b> Salary Support e.g. Clinical coordinator (please indicate designation, FTE, basic salary, etc.)	
	<b>Justification:</b>	
	<b>Total</b>	


**4. OTHER FUNDING SOURCES**

Please provide the following details for any additional support specific for this project from industry partner(s) or any other funding agencies awarded to the Lead Investigator. Attach additional pages if necessary.

**Support from any industry partner(s) funding agencies**  
 Please provide details on the funding or other resources provided by any industry partner(s) funding agencies for the grant applied for.

Organisation/ Funding Agency	Amount of Fund (€)	Support Period (mm/yy to mm/yy)	Items Supported
			e.g. clinical coordinator (1 FTE) - \$25,000 per annum

Version 2.0 - 10 February 2014



**5. DECLARATION OF APPLICANT**


I, the undersigned, certify that:

- The statements in this application are true to the best of my knowledge.
- I acknowledge that this application may not be funded, or it may not be funded at the amount requested.
- I acknowledge that disbursement of funds will be based on completing the project's deliverables and that funding may be terminated if deliverables are not met.

## Updates on PAROS Grant Application

- Malaysia has been awarded the grant - USD36,300
- Memorandum of Understanding has been signed
- Additional sites in Malaysia to come on board PAROS

# PAROS TRAVEL FUNDS REQUEST



**PAN-ASIAN RESUSCITATION OUTCOMES STUDY TRAVEL FUNDING REQUEST**

**Information about the Requestor**

Name	
Date of birth	
Designation	
Organization	
Telephone number	
Fax number	
E-mail address	
Country	

**AMOUNT OF FUNDING REQUESTED (capped at USD2,000)**

US\$ \_\_\_\_\_

Closing date: 15 July 2014 (for travel to Goa, India, EMO Asia 2014, 16-19 October 2014)

**Eligibility Criteria**

- 1) Site must have contributed data to the network
- 2) Site from developing/ lower income countries (refer to this site for list of countries: <http://www.aivest.org/regions/countries/5-outcome01-developing>)
- 3) Only one applicant is eligible per site (not country - e.g. there can be one applicant from Penang and one applicant from Singapore (SgP) within Malaysia)

Closing date: 15 July 2014  
Funds are meant for travel to Goa, India, Oct 2014

Please use Arial font size 10 for all text.


**1. GENERAL INFORMATION**

a) Please state the number of cases your site has contributed to date.

b) Please state the number of cases your site is expected to contribute in the next 6 months.

c) Please state any issues, limitations (if any) encountered in conducting the PAROS study at your site.

d) Please state any concrete plans to resolve such issues/ limitations.



**2. ESTIMATED BUDGET**

a. Airfare (economy) \_US\$\_\_\_\_\_

b. Accommodation (per night x maximum of 4 nights) \_US\$\_\_\_\_\_

**3. CONDITIONS**

1. Successful applicants would have to give a presentation on the progress of PAROS study at their site during the PAROS EXCO meeting.
2. Only economy airfare and accommodation (maximum of 4 nights) are eligible for reimbursement under this travel grant. Total amount of reimbursement is capped at the final approved amount.
3. Original invoices (airfare (including original air ticket stub) and accommodation) would have to be submitted to the Singapore Clinical Research Institute (SCRI) for reimbursement.
4. Reimbursement based on the actual amounts stated in the original receipts will be via telegraphic transfer in SGD @ USD \$1 = SGD \$1.2). All bank charges will be deducted from the disbursed payment amounts.

**4. DECLARATION OF APPLICANT**

I, the undersigned, certify that:

- The statements in this application are true to the best of my knowledge.
- I acknowledge that this application may not be funded, or it may not be funded at the amount requested.

▶ Forms can be downloaded at:

▶ <http://www.scri.edu.sg/index.php/source-documents>