* indicates a requi							
Organisation na	me *	Organisat	ion Name				
Type of Organisa	ation *						
Is the lead organ an Australian re- institute, organi or entity? *	search	○ Yes		0 1	No		
Provide a brief in Lead Organisation in the program (organisations to under Consortiu	on and their r details of par be included l	ole tner below	Word cou	nt:			
				more than 3	00 words.		
Has your organis received funding Government? *			○ Yes		○ No		
Previous Fund	ing						
Please give details	for the past 3	occasions	of previous	Australian (	Government	funding.	
Click "Add More" t	o insert additio	nal lines.					
Name of Activity	Funding Sour	ce Fundi	ng Period	Funding Amount		eement nbers	
				\$			
				Must be a do amount.	ollar		
Lead Organisa	tion Contac	t			•		
Lead Organisation Address *	on Office	Address					
		Physical lo	cation				

	The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.			
	Information from the Australian Business Register			
	ABN			
	Entity name			
	ABN status			
	Entity type			
	Goods & Services Tax (GST)			
	DGR Endorsed			
	ATO Charity Type <u>More information</u>			
	ACNC Registration			
	Tax Concessions			
	Main business location			
	Must be an ABN.			
Primary Contact *	Title First Name Last Name			
Primary Contact Position *				
Primary Contact Office Phone Number *				
Primary Contact Mobile Phone Number *				
Primary Contact Primary Email *	Must be an areal address.			
	Must be an email address.			
Is the Lead Organisation recoga PDP? *	gnised as O Yes O No			
Is this proposal from a consor partners? *	rtium of O Yes O No			
Consortium Partners				
Note for consortia:				

Page 2 of 15

• At least one member of the consortium needs to be recognised as a PDP.

Click "Add More" to insert addition	nal consortium partners.		
Organisation name *			
Australian Business			
Number (ABN)	The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.		
	Information from the Australian E	Business Register	
	ABN		
	Entity name		
	ABN status		
	Entity type Goods & Services Tax (GST)		
	DGR Endorsed		
	ATO Charity Type	More information	
	ACNC Registration	i-lore information	
	Tax Concessions		
	Main business location		
	Must be an ABN.		
Type of Organisation *			
Organisation Contact Name *	Title First Name La	ast Name	
Contact's Phone *			
Contact's Email *			
	Must be an email address.		
Recognised as a PDP? *	O Yes At least one member of the conscass a PDP	No No ortium needs to be recognised	
An Australian research institute, organisation or entity? *	○ Yes	○ No	
Has this consortium member previously received funding from the Australian Government for	○ Yes	○ No	

activities similar in nature to the proposed activities detailed herein? \*

Each consortium partner must attach a 1-page letter that provides:

- brief information about the organisation,
- the relationship with other consortium members,
- expresses the intention to collaborate, and
- details previous funding received from the Australian Government.

Consortium Partner letter *	Attach a file:
	An organisation certification must be completed by each consortium partner. It can be downloaded here and emailed to the partner(s) for completion
Attach Consortium Organisation Certificates *	Attach a file:

#### **Key Personnel**

\* indicates a required field

#### List of Key Personnel

Please list key personnel from the Lead Organisation and where relevant, from other organisations in the consortium.

Please list a minimum of five key personnel and a maximum of ten key personnel.

This list is taken as indicative, understanding that key personnel may change.

Click "Add More" to insert additional team members.

Title *	
First Name *	
Surname *	

Organisation *		
Position *		
Email *	Must be an email address.	
Relevant expertise, expected role or contribution to the partnership *	<b>Word count:</b> Must be no more than 30 words.	
Upload CV of key personnel, including the team leader, detailing their demonstrated	Attach a file:	
proven expertise relevant to the partnership activities		
Proposal Summary		
* indicates a required field		
Proposal Title *		
Geographic Location		
List all countries and the Province	s/Regions where this partnership will implemen	t activities.
Click "Add More" to insert addition	nal lines.	
Country	Key Provinces / Regions	
Country in which activities are impler origin of project beneficiaries	nented or Key provinces or regions within the se country in which the project activities or origin of project beneficiaries.	
Activity Start Date *	Activity End Date *	

#### Proposed partnership and approach

Must be a date.

Must be a date.

	•			
1.	Partnership	activities	and	objectives

\* indicates a required field

1a. Outline the objectives of the partnership *	
	Word count:
	Must be no more than 100 words.
1b. Outline how the proposed partnership addresses the goal and strategic objective of the Partnerships for a	
Healthy Region intiative	Word count: Must be no more than 250 words.

2. Disease targets and product types

### 2a. Complete the following table providing details of disease targets and product types.

Note:

- **Disease areas in scope are:** vector-borne diseases, sexually transmitted diseases, tuberculosis and neglected tropical diseases (<u>Neglected tropical diseases -- GLOBAL</u> (who.int)).
- **Product types in scope are:** vector control tools, therapeutics, diagnostics and vaccines.
- **Country of Reach:** where relevant, indicate country of reach where disease burden is high and product is needed.

Click "Add More" to insert additional lines.

Country of Reach	Disease		Product Type	
2b. Please attach a PDF doc the detailing current status		Attach a file:		
participating PDP's product relevant to this proposal [1 diagram] *	pipeline			

3. Maturity and breadth of product portfolio

3a. Detail two or more relevant candidate products in your portfolio which are in Phase One Trials or later \*

Word count: Must be no more than 20	00 words.		
3b. Demonstrate relast five years *	levant prior and ongo	oing research and de	velopment from the
Word count: Must be no more than 20	00 words.		
Regional focus			
3c. Demonstrate pri	or activity in Southe	ast Asia and/or the P	acific *
Word count:			
Must be no more than 20	00 words.		
Countries *			
☐ CAMBODIA	☐ MARSHALL ISLANDS, REPUBLIC OF THE	□ PAPUA NEW FGUINEA	□ TONGA
□ FIJI	☐ MICRONESIA, FEDERATED STATES OF	□ PHILIPPINES	□ TUVALU
<ul><li>☐ INDONESIA</li><li>☐ KIRIBATI</li><li>☐ LAOS</li></ul>	☐ MYANMAR ☐ NAURU ☐ NIUE	<ul><li>□ SAMOA</li><li>□ SOLOMON ISLANDS</li><li>□ THAILAND</li></ul>	☐ VANUATU Б☐ VIETNAM ☐ Other:
□ MALAYSIA	□ PALAU	☐ TIMOR-LESTE	
4. Global Access	Strategy of PDP		

### **4a.** Articulate what mechanisms you have in place to facilitate access of your **products** including, but not limited to:

- 1.achieving pricing attainable for LMICs;
- 2.moving products through regulatory pathways in a timely fashion;
- 3.moving products into manufacturing and distribution in a timely fashion;
- 4.supporting products to be available where and when they are needed at a volume as determined by the disease burden and country demand;
- 5.supporting country-based knowledge and demand generation; and
- 6.participating in global guideline and policy setting to better facilitate access to new or modified products, including updated treatment guidelines.

\*

vity uture plans for clinical t additional lines. Region	Detail current or future plans for clinical trials in country / region
uture plans for clinical	trials in Southeast Asia and/or the
-	trials in Southeast Asia and/or the
-	
words.	
mproved accessibility of opment, operational research	hin Southeast Asia and/or the Pacif of the product(s) including but not arch, manufacturing, policy and guidelin
t Access and Trial Ac	ctivities
words.	
	ed scope of activity wit mproved accessibility o

#### 6a. Detail your proposed approach to risk and safeguards management.

Demonstrate effective risk management, including consideration of:

- key risks and proposed mitigation strategies;
- the ongoing impact of COVID-19 on product development;
- fiduciary risk; and
- social and environmental safeguards in line with DFAT requirements, and attention to the principle of 'do no harm'.

ų.

Word count: Must be no more than 350 words.  7b. Demonstrate effectiveness, including providing detail on:  1.the applicant's impact and programming to date; 2.how the proposal's End Of Program Outcomes align with and contribute to the Product Development and Access Partnerships' End of Program Outcomes and Intermediate Outcomes (as described in the Guidelines - Section 2, Operational Objectives), within the context of the Partnerships for a Healthy Region initiative's program logic (See Annex 1 of the Guidelines); 3.proposed strategies to advance global policy and guidelines on product development, and other actions to maximise scalability and sustainability of product development a use; and		
Must be no more than 300 words.  6b. Upload your risk profile and risk management framework, including risk ratings and mitigation strategies *  Attach a file:  7. Applicant and organisational effectiveness  7a. Demonstrate effective governance and administrative structures including established and robust financial and human resource management systems and audit reporting. *  Word count:  Word count:  1. the applicant's impact and programming to date;  2. how the proposal's End Of Program Outcomes align with and contribute to the Product Development and Access Partnerships' End of Program Outcomes and Intermediate Outcomes (as described in the Guidelines - Section 2, Operational Objectives), within the context of the Partnerships for a Healthy Region initiative's program logic (See Annex 1 of the Guidelines);  3. proposed strategies to advance global policy and guidelines on product development, and other actions to maximise scalability and sustainability of product development a use; and  4. how the aims of the applicant improve public health, with a focus on those living in low and -middle-income countries including evidence of public health impact to date.		
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	<ul> <li>2.how the proposal's End Of Program Outcomes align with and of Product Development and Access Partnerships' End of P and Intermediate Outcomes (as described in the Guidelines - S Objectives), within the context of the Partnerships for a Health program logic (See Annex 1 of the Guidelines);</li> <li>3.proposed strategies to advance global policy and guidelines or and other actions to maximise scalability and sustainability of use; and</li> <li>4.how the aims of the applicant improve public health, with a formula product of the proposal policy.</li> </ul>	rogram Outcomes fection 2, Operational y Region initiative's n product development, product development ar cus on those living in lov
	•	
Word count:		
Must be no more than 350 words.		

7c. Demonstrate efficiency and sound management and detail how you will address <u>DFAT's Value for Money principles</u>, including mechanisms to:

1.leverage, secure and/or diversify funding bases;

2.manage administrative overheads; and

3.ensure equitable management of human resources, including transparent, fair and effective management of claims relating to inappropriate workplace behaviour.

*		
144		
Word count:		
Must be no more than 200 words		

8. Gender equality, disability and social inclusion (GEDSI)

#### 8a. Articulate a strategy to gender equality, disability and social inclusion (GEDSI) including detail on:

- 1. How analysis and expertise has informed strategy on GEDSI, including key strategies to address barriers and underlying norms that will align with and contribute to DFAT's frameworks and objectives on GEDSI. This should consider and address the following:
  - organisational capability, policies and commitment to GEDSI;
  - how GEDSI relates to product design, target audience, trial design, purpose and characteristics as relevant to disease burden;
  - prioritisation and implementation of GEDSI;
  - information on who will benefit from the proposal, with attention to groups at increased risk and vulnerability; and
  - engagement with representative organisations (for example, women's groups and organisations of people with disabilities)
- 2.Resourcing of the proposed GEDSI approach;
- 3. Risks and safeguards, with attention to the 'do no harm' principle; and
- 4. How the applicant will monitor, evaluate and report on GEDSI related work.

*		
Word count:		

#### word count.

Must be no more than 350 words.

#### **Proposed Budget**

\* indicates a required field

#### **FUNDING REQUESTED**

Funding request by Australian financial year (financial year means 1 July to 30 June) to be provided in Australian Dollars (AUD).

Please ensure financial year totals exactly match those included in the 'Yearly DFAT Financing Breakdown' sheet of the uploaded budget file.

Consider **DFAT's Value for Money** principles in budget development.

Funds Requested 2022-23	Funds Requested 2023-24	Funds Requested 2024- 25
\$	\$	\$
Must be a dollar amount.	Must be a dollar amount.	Must be a dollar amount.
Funds Requested 2025-26	Funds Requested 2026-27	Total Funds Requested From Australia *
\$	\$	\$
Must be a dollar amount.	Must be a dollar amount.	This number/amount is

Proposal budget is to be within the range of \$5 million to \$20 million over five years. Total funding requested from DFAT over five years cannot exceed \$20 million.

Your application cannot be submitted if total funding requested from DFAT exceeds this amount.

Funding Validation (Total Funds Requested From Australia less \$20m) \*

this number/amount is calculated. Must be equal to or less than zero.

WARNING: Funding from DFAT over 5 years exceeds \$20 million.

Applicant's contribution to the proposed activities \*

\$ Must be a dollar amount.

Funding from other sources

Please share details of future funding for PDP (lead organisation) by donor and financial year (FY2022-23 to FY2026-27) in AUD.

Click "Add More" to insert additional lines.

Donor	Disease (if Specified)		Funding Period	Amount (AUD)	Contractual Gomments Secured?
				For period FY2022-23 to FY2026-27	
		☐ Vector Control ☐ Therapeutics (eg. Drugs) ☐ Diagnostics ☐ Vaccines		\$	

		☐ Other:						
		`						
Total Fundir		\$						
other source	es *	This nu	ımber/amo	unt i	s calculated.			
Income from All Sources \$								
TOTAL *		Ψ.	This number/amount is calculated.					
BUDGET								
BUDGLI								
Download but upload file be		e for completi	on, follow	guid	dance notes i	ncluded. Onc	ce completed	
Budget templ	ate - downloa	ad here						
Upload com	nleted	۸ttack	n a file:					
budget tem		Attaci	ı a me.					

Enter total values requested from DFAT (for duration of funding) for each cost category. Values to exactly match those included in the uploaded budget file.

Cost Category	Description	DFAT Funding Requested	- 3	Other Sources Funding
		Must be a dollar amount.		Must be a dollar amount.
		\$	\$	\$

DFAT Funding Requested TOTAL *	Organisation Contribution TOTAL *	Other Sources Funding TOTAL *
\$	\$	\$
This number/amount is calculated.	This number/amount is calculated.	This number/amount is calculated.
Budget funding from all sources TOTAL	*	
This number/amount is calculated.		

#### **Validations**

spreadsheet \*

The calculations below check that the total income is equal to the total expenses reported above, as well as each of the funding sources.

Total Funds Requested from Australia less DFAT Funding Requested TOTAL \*

Your Organisation's Contribution less Organisation Contribution TOTAL \* Total Funding from other sources less Other Sources Funding TOTAL

\$	\$	\$
This number/amount is calculated. Must be equal to zero.	This number/amount is calculated. Must be equal to zero	Must be equal to zero.
Total Income from All Sources TO Budget funding from all sources T		
\$		
Must be equal to zero.		

#### Referee Information

\* indicates a required field

Applicants **must** attach letters of support from two referees (Note: as attachments to this proposal).

For consortia, two letters of support from referees **must** be provided for each consortium partner.

Referees **must** comment on the organisation's experience and capacity to achieve the objectives and outcomes of the Product Development and Access Partnership program.

Organisations **must** ensure that their nominated referees do not have an actual or potential conflict of interest when acting as a referee. In particular, organisations **must** ensure that referees:

a) Are not employees of the organisation, or the holder of a current executive office (or similar position) within the organisation, or have a business association with the organisation, or a subsidiary organisation of the organisation; b) Are not their immediate family members, have no direct financial interest in this activity; c) Are not current or former DFAT employees; d) Are available to be contacted after the Activity Proposal closing time; and e) Are able to provide comments in English.

DFAT reserves the right to check with nominated referees and with other persons the accuracy of the information provided by the organisation and the quality of past work performed by the organisation.

For the purposes of this Referee Information and Organisation's Certification, "Former DFAT employee' means a person who was previously employed by DFAT, whose employment ceased within the last nine (9) months, and who was substantially involved in the design, preparation, appraisal, review, and or daily management of the activity with which this grant program is associated.

Attach letters of support *	Attach a file:			
	Must be two (2) letters of support attached			

#### Lead Organisation's Certification

\* indicates a required field

Lead Organisation's Certificat	ion * ☐ I hold a position with the Lead Organisation and am duly authorised by the Lead Organisation to make this declaration. I make this declaration on behalf of the Lead Organisation and on behalf of myself. ☐ I have read the information provided in the Product Development and Access Partnership Guidelines. ☐ The statements in this proposal are true to the best of my knowledge ☐ I acknowledge that if the Lead Organisation is found to have made false or misleading material claims or statements in this proposal or in this certification, DFAT will reject at any time any proposal lodged by or on behalf of the Lead Organisation. ☐ I acknowledge that this proposal will be assessed on its merits, and compared to other proposals, and that it may not be funded, or it may not be funded at the amount requested. ☐ I warrant that the Lead Organisation will use its best endeavours to ensure that all personnel involved in the Activity are of good fame and character.
I warrant that the Lead Organisat	ion will use its best endeavours to ensure:
*	☐ That individuals or organisations involved in implementing the Activity are in no way linked, directly or indirectly, to organisations and individuals associated with terrorism; and ☐ That the Funding is not used in any way to provide direct or indirect support or resources to organisations and individuals associated with terrorism.
of Ineligible Firms" or "Listings of World Bank Website	organisations maintained by the World Bank in its "Listing Firms, Letters of Reprimand" posted at:
I warrant that the Lead Organisat	ion is not:
*	☐ Listed on a World Bank List or a list maintained by any other donor of development funding; ☐ Subject to any proceedings or informal processes which could lead to listing on a World Bank List or a list maintained by any other donor of development funding ☐ The subject of an investigation by the World Bank or any other donor of development funding.

* Authorising Officer	to the Au your orga for non-p	rant that the Lead astralian Government anisation against to profit organisations and that neither the yees, agents or concerned of a public eedings which coulertake that the Lead edings which coulertake that the Lead well-being. Refer that the Activity have elating to child about that the Lead eding for this Activity declared in this profit that that this proposes or with imployees or with imployees or with improved the strand of t	ent guidance "Safe errorism financing".  The Lead Organisation tractors have be to fraud or corrupt official, nor are to lid lead to such a condition was or contractors, acceptable risk to to DFATs Child Prome key personnel to the key personnel to been convicted use, nor are they seed to such a convicted use, nor are they seed to such a convicted use, nor are they seed to such a convicted use, nor are they seed to such a convicted use, nor are they seed to such a convicted use, nor are they seed to such a convicted use, nor are they seed to such a convicted use, nor are they seed to such a convicted use, nor are they seed to such a convicted use, nor are they seed to such a convicted use, nor are they seed to such a convicted use of the see	eguarding : a guidance ion nor any of een convicted otion, hey subject to conviction. ill not permit to work with children's otection who are of a criminal subject to any iction. not received ource other prepared with
Authoritain a Office a	T:41-	First Name	Last Nassa	
Authorising Officer *	Title	First Name	Last Name	
Position *				
Organisation *				
Phone Number *				
Date of Authorisation *	Must be a	date.		