****

**REMOTE ACCESS RESEARCH GATEWAY**

**DATA OVER MULITPLE INDIVIDUAL OCCURENCES (DOMINO)**

**PROJECT SUMMARY**

|  |  |
| --- | --- |
| 1. Name of Project |  |
| 1. Who is making the request?   Include name, title, organisation, phone and email. |  |
| 1. What is the name of sponsoring organisation for the request?   Include address and ABN/ACN as appropriate. The sponsoring organisation must be approved and must have completed an Agreement. |  |
| 1. Who is the contact person in the sponsoring organisation?   Include name, position, phone and email. |  |
| 1. Description of the project including its purpose.   Project description and plan.  Please provide as much information about your project as possible.  This should include a description of how the output contributes to your project, the types of output required and how the information you are requesting is used to generate these outputs. |  |
| 1. What information is requested?   Please provide specific details on the variables you wish to access from the Department of Social Services (DSS) datasets. AIHW can assist you to select the variables you require. |  |
| 1. Do you need to bring any aggregate/non-unit record data into the project workspace?   Please provide specific details about the type of data to be incorporated, including the type of data and its use. |  |
| 1. Does your project involve linking another dataset to the DSS data? What dataset is to be linked?   Please contact AIHW at the earliest oppourtunity to discuss the data and how the linkage will occur. |  |
| 1. Could the release of information have implications for people, groups or entities?   If so, what are the implications and who is affected (both directly and indirectly)? |  |
| 1. How will the project’s report(s) be disseminated?   Not required for Commonwealth Government entities. |  |
| 1. What are the anticipated commencement and completion dates? |  |

**Please attach a detailed project plan with timelines to this form.**

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Contact Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please print name, position and organisation. Please scan and email this form to [domino.dataset@aihw.gov.au](mailto:domino.dataset@aihw.gov.au) . Please email a scanned signed copy anda version that can be edited in MS Word to enable cutting and pasting sections of the document for administrative purposes..

|  |  |  |
| --- | --- | --- |
| **For Administrative Use** | | |
| Project name and reference number |  | |
| Proposal Handling | Received by  On | Sent to DSS for decision or  Returned (+reason)  Date |
| Proposal Decision | Supported / Not Supported by DSS  Date | Reason if not supported |
| If successful, project contact advised of the outcome by AIHW. | By  On | Comments |