**Innovating for Improvement Round 5**

**Section 8: supporting signatures from the lead organisation**

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  |  |  |

**Data Protection Act 1998**

*To comply with this Act, we require your consent to the Health Foundation and their approved agents to use personal data supplied by you in the processing and review of this application and in any other legitimate activity of the Foundation; this includes transfer to and use by such individuals and organisations as the Foundation deems appropriate. The Health Foundation requires your further assurance that personal data about any other individual is supplied with his/her consent.*

*By completing the declaration and support form you are confirming that the information you have supplied is, to the best of your belief, correct and you are fully supportive of this application.*

Lead organisation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am signing this as: (please tick as appropriate)

|  |  |
| --- | --- |
| **A senior leader and project sponsor for this project application** |  |
| **The lead organisation’s senior member of the finance team** |  |

**Please PRINT NAME in the box below:**

|  |
| --- |
|  |

**Please sign in the box below:**

|  |
| --- |
|  |

**Date: ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**