**THOMAS TIPPET EDUCATION AWARDS CANTERBURY**

**APPLICATION FORM**

**Type of Application*:*** **COMMUNITY HEALTH**

DATE RECEIVED

**(Please circle) COURSE/CONFERENCE IN NZ**

**COURSE/CONFERENCE OVERSEAS**

**POST GRADUATE**

**Course Details:**

**Course Name:**

**Venue:**

**Dates:**

**Personal Details:**

**NZNO Member No:**

**Name of Applicant:**

**Contact Address:**

**Email:**

**Phone Numbers:** **Home:**  **Work:**

**Workplace:**

**Area of Practice:** **Position**

**Bank & Account Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*(we are unable to make any payments if you do not include your bank account details)*

**Please Note: All relevant course/conference info MUST be included with this Application.**

**Please list the full costs, and include any other sources of funding below:**

(Funding from other sources does ***NOT*** mean you are ineligible for an award)

**Registration Costs:**

**Travel Costs:**

**Accommodation costs:**

**Other costs: (provide details)**

**Total costs:**

**Funding received from:**

**How will attending this Conference/ Course/ Seminar, assist you and your colleagues?**

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

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

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

**Please outline your involvement with NZNO regionally and/or nationally.**

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

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***Declaration:***

***I agree to acknowledge receipt of any awards granted, and will submit a reflection/report to the committee within three (3) months of attending the course/conference/seminar or on completion of the paper/ project. I agree to use the grant for the purpose for which it has been awarded, or I will return the awarded sum to the committee.***

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

Post Application to: Attn: Fiona Palframan, Specialist Administrator

Thomas Tippet Education Awards Committee

PO Box: 4102, Christchurch 8140

Ph. 03 353 1220 or [fiona.palframan@nzno.org.nz](mailto:fiona.palframan@nzno.org.nz)

Cut off for Applications: Applications are processed twice yearly after closing dates of 31 March and 30 September, by the TTEAC committee

Applicants notified by email: Within three (3) weeks of the date of the meeting closest to when the Application was received.