



College of Emergency Nurses NZ Grant Application Form

Name: _____

Postal address: _____

Email address: _____

Applicant designation / role: _____

Employer/DHB: _____

NZNO Membership number: _____

Name of conference/study day/ university paper etc. (if possible please attach flyer)

Dates and venue: _____

Total costs claimed (this should include course fees and travel costs with invoices and receipts):

\$ _____

Bank Branch Account Suffix

Please enter your bank account details: _/ _/ _ _ _ _/ _ _ _ _ _ _/ _ _ _ _

Please indicate the grant you are applying for and ensure that you attach all the relevant documentation required. (Please refer to CENNZ website for criteria):

- CENNZ Education Grant
- Postgraduate Study Grant
- Conference Grant (Cut off for applications are July 1st. Please send invoice/receipt to CENNZ secretary)
- Pacific Islands Nursing Grant
- Emergency Nurses Leadership Grant

http://www.nzno.org.nz/groups/colleges_sections/colleges/college_of_emergency_nurses/grants_awards

