

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:		

Please Note: All relevant course/conference info MUST be attached to this Application. This MUST include proof of prior payment of registration, course/conference details and any travel/accommodation costs claimed'

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



<u>Please list the full costs, and include any other sources of funding below:</u> (Funding from other sources does *NOT* mean you are ineligible for an award)

Travel Costs:		
Accommodation costs:		
Other costs: (provide details)		
Total costs:		
Funding received from:		
How will attending this Confe	erence/ Course/ Seminar, assist you and your colleagues?	
		-
Please outline your involvem	ent with NZNO regionally and/or nationally.	
		-
		-
Declaration:	aint of any awards aranted, and will submit a reflection	(report to the
I agree to acknowledge rec committee within three (3) m	eipt of any awards granted, and will submit a reflection, on the grant for the purpose for which it has been awarded on the grant for the purpose for which it has been awarded on the grant for the purpose for which it has been awarded on the grant for the purpose for which it has been awarded on the grant for the purpose for which it has been awarded on the grant for the purpose for which it has been awarded on the grant for the purpose for which it has been awarded on the grant for the	npletion of the
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I agree to acknowledge rec committee within three (3) m paper/ project. I agree to use the awarded sum to the com	nonths of attending the course/conference/seminar or on cone the grant for the purpose for which it has been awarded, o mittee.	npletion of the or I will return
I agree to acknowledge rec committee within three (3) m paper/ project. I agree to use the awarded sum to the com- Signed:	Attn: Fiona Palframan, Secretary Thomas Tippet Education Awards Thomas Tippet Education Awards PO Box: 4102, Christchurch 8140	npletion of the or I will return