Australian Plants Society Tasmania Inc.

Grant Application Form

Return to: Secretary, PO Box 3035 Ulverstone MDC Tas., 7315

1. Surname: Member of the APSTInc.: Yes / No First name/s:
2. Postal address: Phone: Fax: Email:
3. Occupation and academic qualifications: a. Present occupation: b. Qualifications held and year completed: c. If a student; - qualification being studied - year first enrolled - proposed completion year d. If a volunteer; - name of organization associated with - length of time with organization
4. Title of project:
5. Aims, outline and duration of project (up to 3 extra pages may be attached):
6. Proposed budget and justification and amount requested (maximum $1500):
7. Collaborator (if any):
8. Names, addresses and telephone numbers of two referees: a. b.
9. Other grants/awards currently held and/or applied for:
10. Institutional/Organisational support for project: Signature of representative: Name: Date:
I hereby apply for an Australian Plants Society Tasmania Inc. Grant and agree to the following conditions: a. To apply to the project described above any Grant monies that are awarded. b. To acknowledge said Grant in any relevant publications. c. To provide a summary of the project outcomes for publication in the Society's newsletter, *Eucryphia,* within 12 months of the Grant being awarded. d. To provide a statement on the use of the funds to the APSTInc. Treasurer within 12 months of the Grant being awarded. Signature of applicant: Date: If applicant is a student, the applicant will be carrying out the project under my supervision: Signature of supervisor: Name: Date: