

Application to the J Campbell Barrett Wellington Anaesthesia Trust
Request for Non-Research Grant

Applicant Details

Delete all blue content for final submission

Principal Applicant: *(Name, Qualifications, Position)*

Co-Applicant(s): *(Name, Qualifications, Position)*

Host Institution:

Email address for Correspondence:

Phone:

Project Title:

Total Support Requested: *(GST Excluded)*

Date of Application:

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The Project

1. **Aim:** *(One sentence describing the aim of the project)*
2. **Background:** *(Why this application is being made. No more than 600 words)*
3. **Project:** *(Indicate what will happen such as running a course or study day, purchase equipment, fund a visitor. If you are running a course identify who will be attending, recognition towards continuing professional development and education and a course content or outline is also useful. No more than 600 words)*
4. **Relevance:** *(What is the significance of this project, who will benefit and why, no more than 300 words)*

Financial Support Requested

Breakdown of Budget *(transport, catering, consumables etc. Provide quotes recommended)*

Other Support Available *(What other facilities are being used e.g., within host institution, other financial support)*

Conflicts of Interest. *(Declare any potential conflicts of interest)*

Host Institution Approval

“This application is approved by our institution and / or head of department.” ☐

Acknowledgement of Support

“I agree to acknowledge the support of the Trust in reported outcomes and allow the Trust to also report these outcomes.” ☐

Declaration

“I declare that all details contained in all sections of this application are true and correct to the best of my knowledge.” ☐