

APPLICATION FORM

PLEASE PRINT CLEARLY



NOTE: Applications must be received at least six weeks ahead of the event for which the grant is required.

Southland Medical Foundation (Inc)

SECTION A		APPLICANT DETAILS	
Title and Surname <small>(Dr/Mr/Mrs/Miss/Ms)</small>	<input style="width: 95%;" type="text"/>	Given Name/s	<input style="width: 95%;" type="text"/>
A/Hrs Contact Phone	<input style="width: 95%;" type="text"/>	Email	<input style="width: 95%;" type="text"/>
Address	<input style="width: 98%;" type="text"/>		
Present Position	<input style="width: 98%;" type="text"/>		
Employer	<input style="width: 98%;" type="text"/>		
Names and contact details of 2 relevant referees who can, if requested, provide a confidential report.	1 Name:	2 Name:	
	Contact Phone:	Contact Phone:	
	Address:	Address:	

SECTION B	PURPOSE FOR GRANT APPLICATION
	<i>If for education or research, please specify likely benefits to yourself, colleagues and/or the public, how you propose to disseminate the information gained and the extent of your commitment to your present position and the Southland region. A detailed answer will assist consideration of this application. If for equipment, please outline its role in education and/or research.</i>
	<i>If there is insufficient space for a detailed description please supply further information on a separate sheet of paper (typed is preferred). For courses and conferences please include programme content plus registration details.</i>
	<input style="width: 98%; height: 100px;" type="text"/>

SECTION C		FINANCIAL DETAILS	
Grant Amount Sought	\$ <input style="width: 150px;" type="text"/>	Have you applied for funding from any other organisation [†]	Yes / No <input style="width: 50px;" type="text"/>
		[†] Amount granted	\$ <input style="width: 100px;" type="text"/>
Have you applied to the Southland Medical Foundation previously?*	Yes / No <input style="width: 50px;" type="text"/>	[†] Name of Organisation	<input style="width: 250px;" type="text"/>
*If yes and you were successful:	Year <input style="width: 50px;" type="text"/>	Amount Granted	\$ <input style="width: 100px;" type="text"/>
	Year <input style="width: 50px;" type="text"/>		\$ <input style="width: 100px;" type="text"/>
Bank Account Number of Applicant: <input style="width: 200px;" type="text"/>			

PROPOSED FUNDING:	
Estimated TOTAL COST	\$ <input style="width: 150px;" type="text"/>
BREAKDOWN OF COSTS	
Employer Contribution	\$ <input style="width: 150px;" type="text"/>
Own Contribution	\$ <input style="width: 150px;" type="text"/>
Other Funding	\$ <input style="width: 150px;" type="text"/>
	Registration Fees \$ <input style="width: 100px;" type="text"/>
	Air Fares/Transport \$ <input style="width: 100px;" type="text"/>
	Other \$ <input style="width: 100px;" type="text"/>

I/We authorise the Southland Medical Foundation to make enquiries of any third parties (which may involve discussing information contained in this application), in connection with this application and if a grant is successful undertake to abide by the accountability provisions in paragraph 6 of the 'Information for Grant Applicants' printed on the accompanying page.

Signature of Applicant	Date / /
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INFORMATION FOR GRANT APPLICANTS

1. The Southland Medical Foundation (Inc) was founded in 1966 at a time when there were serious differences between the then Southland Hospital Board, the hospital administration and the medical profession over the development of Southland Hospital and when there was grave concern over a shortage of general practitioners in Southland. Much of the early work of the Foundation was aimed at increasing the quality and spread of medical services in the province through financial assistance to doctors to establish here. In more recent years the Foundation has been involved in providing equipment to improve facilities and enable medical research to be carried out and in financing health education in its broadest aspects, for nurses, doctors and paramedical workers.
2. The Foundation is controlled by a Council of ex-officio and appointed members, representatives of local bodies, hospital administration and professional organizations of doctors and nurses together with seven elected lay members. Its day-to-day work is handled by its Executive and Grants Committee.
3. The Foundation invites applications for grants to fund health education, research and equipment, and must be made on the official grant application form. Such applications should be made **at least six weeks** in advance of the time the funding is required. In addition to its general fund, the Foundation has special funds available for cardiac and cancer research and to assist the mentally ill. Grants from these funds may be provided at the Foundation's discretion. Applications for retrospective funding will generally not be considered.
4. Applicants are required to provide a breakdown of proposed funding indicating the likely total cost, other funding obtained or in prospect, and what contribution they are able to make themselves. Details of any conference or study course should be included. Please include as many relevant details as possible, including content of conferences, study courses and financial details. A covering letter would be helpful.

As a general rule concerning conferences, seminars and study courses, the Foundation will only consider funding for **Registration Fees and Travel**.

The names and addresses of two referees who may be approached for a confidential report must also be provided. The Southland Medical Foundation reserves the right to make enquiries of any third parties which may involve discussing information contained in any application.
5. **Early Bird Registrations** Where an early bird fee is offered when registering, the Grant Committee will only pay this as a maximum, regardless of when you register for a course, seminar or conference; Therefore all applicants are encouraged to register at the earliest opportunity to take advantage of early bird rates or fees.
6. Successful applicants for grants to attend seminars and courses are required to provide a report to the Foundation within one month after completion, outlining the likely benefits to themselves and their patients and indicating how the knowledge gained will be shared with colleagues. Recipients of grants for research are required to provide periodic reports on progress at specified intervals, with a further report on the benefits to the community on completion of the research.

Further information may be obtained from:

Email: info@southlandmedicalfoundation.org.nz

The Secretary/Treasurer, Southland Medical Foundation
P O Box 5083, Waikiwi, Invercargill, 9843

www.southlandmedicalfoundation.org.nz

Please ensure that the form you are using to apply for funding has been downloaded recently from the Southland Medical Foundation Website, as this will be the most up to date application form.