



CANCER SOCIETY OF NEW ZEALAND, WELLINGTON DIVISION,
MEDICAL AND SCIENTIFIC COMMITTEE

Application for a Professional Development Grant

General

The Committee aims to assist appropriate researchers and health professionals working in the Wellington region by providing financial support to assist them attend relevant conferences, seminars or courses in New Zealand or overseas. The general aim is to help successful applicants gain experience that will lead to improvements in cancer care in Wellington.

The grants provided by the Committee have often been roughly equivalent to the fare components of applicants' total costs. Other sources have frequently been able to provide significant proportions of remaining costs.

The Committee may also assist in supporting overseas cancer experts visit New Zealand to assist people involved in cancer study and care here.

Applications should have written support from two appropriate senior staff (Manager and/or Referees) familiar with the applicants in their working environments. Deadlines for the submission of applications on the attached form are the 1st of the months in which the Medical and Scientific Committee meets. Meeting dates are planned for: February, May, August and October.

This application should be forwarded to:

Michael Smith
The Chief Executive Officer
Cancer Society Wellington Division
52 Riddiford Street
Wellington 6021

Phone: 04 3898756

michaels@cancersoc.org.nz

Website: www.cancersoc.org.nz

1. Applicant's Name
& Address

Present Position
(Full-time/Part-time)

Contact Tel/Fax

E-mail

Employer's Name
& Address

CV Data

Secondary & Tertiary Education?

Qualifications, Awards & Grants?

Talks & Seminars given?

Research Experience?

Publications?

Positions Held with Dates?

Referees. Please name and ask two senior people who know you in the work environment - as well as your manager - to support this grant application.

**2. Conference/Seminar
/Course title & dates:**

**What do you hope
to gain from the
experience?**

Please attach information regarding the meeting. Tick box if included ->

3. Costs

Return fare to:	<input type="text"/>	<input type="text" value="\$NZ"/>
Accommodation	<input type="text"/> nights	<input type="text" value="\$NZ"/>
Registration		<input type="text" value="\$NZ"/>
Other (please specify)	<input type="text"/>	<input type="text" value="\$NZ"/>
TOTAL		<input type="text" value="\$NZ"/>

4. Other Support.

How much do you expect to receive from:

a. Your employer		<input type="text" value="\$NZ"/>
b. Other sources (please specify)	<input type="text"/>	<input type="text" value="\$NZ"/>
c. Total		<input type="text" value="\$NZ"/>

5. Sum requested from Cancer Society	<input type="text" value="\$NZ"/>
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6. Previous grants received from the Cancer Society by this applicant. Specify purposes, amounts and years

SECTIONS 7-11 ARE FOR THE ATTENTION OF THE APPLICANT'S MANAGER

7. Please tell us why you want this applicant to go to this event or to do this course and how this will help minimise the impact of cancer on our community.

All applications for funding should also include letters from two referees and any other supportive information. Please tick box if included.

8. A paper/poster for presentation by the applicant has been accepted / submitted? (Please delete one or both). The topic is:

9. This applicant is eligible for leave should appropriate financial support be granted. It is understood that the funds cannot be used for any purpose other than that described in this application and that a one page report for possible publication will be forwarded to the Cancer Society within one month of returning to Wellington. I will also arrange for the applicant to disseminate information to colleagues on return to New Zealand.

Signed

(Manager) Date

10. I forward this application for your consideration

Signed

Date

<i>(For office use)</i>	Date received	<input type="text"/>	Application Acknowledged	<input type="text"/>	
Decision Approved/Not Approved	<input type="text"/>	Amount	<input type="text"/>	Date letter/cheque mailed	<input type="text"/>

Submission This form should be completed and sent to the Chief Executive of the Cancer Society of New Zealand, Wellington Division by 1st of Month prior to meeting date on first page.