



NZERF Travel Award

Application Form

Last name (Family name):

First Name:

Middle Name (s)

Are you a New Zealand Resident?: Yes/No

Postal Address:

Home Address (if different):

Contact Details:

Mobile:

Phone:

Email:

- Please attach an up-to-date curriculum vitae/resume including qualifications
- Please provide a brief explanation of the purposes of your trip
- Please provide your travel plans and estimated transport costs (*give dates, countries, Cities, flights, trains, etc., do not include accommodation or meals*)

Starting date:

Expected returning date:

Estimated total cost:	Self	\$
	Other sources - specify	\$
		\$
	Total	\$

Amount sought from NZERF **\$**

Signature: _____

Date: _____

Please submit your application to:

The Secretary,
New Zealand Equine Research Foundation,
P O Box 52,

Palmerston North 4440

Phone: 06 3564940

Fax: 06 3542885

Email: nzerf@xtra.co.nz

Website: <http://nzerf.co.nz>



CONDITIONS

ALL APPLICANTS FOR THE VET/FARRIER SCHOLARSHIP MUST UNDERTAKE TO ABIDE BY THE FOLLOWING CONDITIONS:

1. That the application must be completed on the prescribed form.
2. That the applicant may be required to attend an interview to support their application.
3. That the Award funds must not be expended for any other purpose than that described in the application. Changes to approved expenditure can only be made, in exceptional circumstances, with the approval of the Board of the NZERF.
4. That **the Foundation accepts no responsibility** for liability suits, actions, demands, damages, costs or fees on account of death, injuries to persons or property or any losses resulting from or connected with any act or omission performed in the course of completing the funded project.
5. That the applicant agrees to supply to the NZERF a report within 2 months of the completion of the project/study for which the award is made. This report should be suitable for inclusion in the "Lay press". Timing of reporting may be varied and will be agreed to by both parties.
6. Applicants must acknowledge the funding of the Foundation in any published works and supply 2 copies of any such publications to the Foundation.



Please note this is only to be completed when the Travel Award is approved

This is an agreement between:

The New Zealand Equine Research Foundation,

And

The recipient (person responsible): _____

Signed for and on behalf of:

The New Zealand Equine Research Foundation by

Name: _____

Signed: _____

Designation: _____

Date: _____

Signed for and on behalf of:

The recipient:

Name: _____

Signed: _____

Designation: _____

Date: _____

Applications, correspondence and final reports should be returned to:

The Secretary
New Zealand Equine Research Foundation
P O Box 52
PALMERSTON NORTH 4440
nzerf@xtra.co.nz

REPORTING SCHEDULE