**Application for Travel Grant for Australian Graziers or Rangeland Pastoralists**

The applicant is to complete this form. This completed application and any supporting documentation must be emailed to the AW Howard Trust using the contact details provided at the end of this application by **31 March 2025.**

Nominated referees should also provide a written statement of support. Referees should be senior academics or researchers with experience of the applicant's recent work.

**APPLICANT DETAILS**

1. **Applicant details:**

|  |  |
| --- | --- |
| **Name:** |  |
| **Date of birth:** |  |
| **Postal address:** |  |
| **Contact number:** |  |
| **Email:** |  |
| **Nationality:** |  |

1. **Educational qualifications or industry training**
2. **Name of employer or business name**
3. **Present responsibilities** *(give brief account of your current pasture-related activities)*
4. **Cite any notable achievements you have made in the management of regional grazing systems and/or the protection of natural resources**
5. **Describe the main objectives proposed for the study award** *(summarise your proposed travel plans, including departure and return dates in an attachment)*
6. **State what you hope to achieve from the study award that may benefit**
	1. **Your own business:**
	2. **Regional grazing or pastoral industries (e.g. improved, sustainable grazing systems and/or natural resource management):**
	3. **Regional communities:**
7. **Financial statement**
	1. **Total sum sought as a grant?** *(itemise on attached budget sheet)*
	2. **How much will your employer or your own business contribute to these costs?**
	3. **Have you applied, or do you intend to apply for other sources of financial support?** *Please name them and indicate the amount sought/approved*
8. **Indicate if you have undertaken a study tour within the last 5 years:**
9. **Have you previously been awarded a grant by the AW Howard Memorial Trust?**

**If so, when?**

1. **Additional information which you feel would assist in the consideration of your application**
2. The applicant is required to ensure that two confidential referee reports are forwarded directly to the Executive Officer of the Trust. The referees are to be acquainted with the applicant’s experience and present standing. It is the responsibility of applicants to ensure that the referees are able to supply the references to accompany the application to the executive officer before the closing date ofapplications.

|  |  |  |
| --- | --- | --- |
|  | **Referee One** | **Referee Two** |
| **Title** |  |  |
| **Last Name** |  |  |
| **First Name** |  |  |
| **Current Position** |  |  |
| **Address** |  |  |
| **State** |  |  |
| **P/code** |  |  |
| **Country** |  |  |
| **Telephone** |  |  |
| **Email** |  |  |

1. **Please indicate when you expect to leave Australia if your application is successful**

**DECLARATION**

I hereby apply for the AW Howard Memorial Trust Travel Grant for Australian Graziers or Rangeland Pastoralists and declare that the information given in this application is correct and complete. I am aware that there are penalties for providing false or misleading information.

If you are successful, the Trust will pay the funds to your organisation or to you if you are a sole operator on receipt of necessary details.

Successful applicants are required to provide a full report on their study tour within three months of completion of their trip.

**COMPLETED APPLICATIONS**

Please email the completed application and all necessary supporting documentation, to the Executive Officer, AW Howard Memorial Trust (howard.trust@sa.gov.au) by **31 March 2025.**

Applicant’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The AW Howard Memorial Trust Inc.**

**Itemised/Justified Budget**

|  |  |
| --- | --- |
| **NAME OF APPLICANT:** |  |

|  |  |
| --- | --- |
| **ITEM** | **AMOUNT REQUESTED (AUD)** |
| **Airfares:** | $ |
| **Other fares** *(taxis etc.)****:*** | $ |
| **Accommodation:** | $ |
| **Living expenses:** | $ |
| **Conference fees:** | $ |
| **Other** *(please specify)***:** | $ |
| **Total request:** | $ |

**JUSTIFICATION**

*(Briefly justify the nature and quantum of each of the budget items requested)*

**AIRFARES:**

**OTHER FARES** *(taxis etc.)****:***

**ACCOMMODATION:**

**LIVING EXPENSES:**

**CONFERENCE FEES:**

**OTHER** *(please specify)****:***