**Application for Travel Grant for Australian Pastoral Industry Extension Specialists, Consultants and Agribusiness Staff**

1. **Applicant details:**

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

1. **Name of employer or business name**
2. **Present position**

*Give brief account of your current employment*

1. **Educational qualifications, including industry training courses**
2. **Cite any notable achievements you have made, or been associated with, involving the management of pastures, grazing systems or natural resource management**
3. **Describe the main objectives proposed for your study award**

*Summarise your proposed travel plans, including departure and return dates (if applicable) in an attachment*

1. **List benefits of your proposed travel to:**
   1. **You, the applicant**
   2. **Your organisation**
   3. **The grazing industries you serve**
2. **Additional information which you feel would assist in the consideration of your application**
3. **Financial statement** 
   1. **Total sum sought as a grant?**
   2. **How much will your employer / institution contribute to these costs?**
   3. **Have you applied or intend to apply to other sources for financial support?** *If yes, provide details*
4. **Indicate if you have undertaken a study tour within the last 5 years**
5. **Have you previously been awarded a grant by the AW Howard Memorial trust?**

**YES / NO**

**If yes, when?**

1. The applicant is required to ensure that two confidential referee reports are forwarded with their application 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 of applications.

|  |  |
| --- | --- |
| **REFEREE 1** | |
| **Name** |  |
| **Organisation** |  |
| **Address** |  |
| **Contact Number** |  |
| **Email** |  |

|  |  |
| --- | --- |
| **REFEREE 2** | |
| **Name** |  |
| **Organisation** |  |
| **Address** |  |
| **Contact Number** |  |
| **Email** |  |

1. **Please indicate when you expect to leave Australia if your application is successful**
2. **How did you find out about the AW Howard Memorial Trust and the grants available?**

**DECLARATION**

I hereby apply for the AW Howard Memorial Trust Travel Grant for Australian Pastoral Industry Extension Specialists, Consultants and Agribusiness Staff 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.

Post-graduate students must provide proof of enrolment.

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](mailto:howard.trust@sa.gov.au)) by **31 March 2024.**

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

**The AW Howard Memorial Trust Inc**

**Pastoral Industry Extension Study Award 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)****:***