

**The Trans-Antarctic Association**

**Grant Application Form (NZ) 2024**

*For queries of any sort, email or phone* [*Peter.Barrett@vuw.ac.nz*](mailto:Peter.Barrett@vuw.ac.nz) *022 463 5336.*

*Use Left click, Tab and Arrow keys to fill in text inappropriate columns.*

**Personal Details:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Full name: | ………………………………. | | | | | |
| Address: | ……………………………….  ……………………………….  ………………………………. | | | | | |
| Email address: | ………………………………. | | | | | |
| Date of birth: | dd/mm/yyyy..………………. | | | | | |
| Place of birth: | ………………………………. | | | | | |
| Citizenship: | | Australia | New Zealand | South Africa | UK | Please highlight all that apply |

Please note: 1. Applicants must be a citizen of one of the above countries to qualify for a grant.

2. Applications will only be considered for projects relevant to the Antarctic.

If the grant is being sought on behalf of an organization or club,

give name here: ………………………………..

……………………………………………………………..

**Brief title and summary:**

Please give a brief title and two line summary for your project

|  |
| --- |
| Title: ………………………………….  Summary: ………………………………….  ………………………………… |
|  |
|  |
|  |

**Notes:**

1. Please try to be succinct; if more space is required, the text boxes can be expanded. However, applications exceeding five pages will not be considered.
2. Return the completed form by 15th March 2024 to: [Peter.Barrett@vuw.ac.nz](mailto:Peter.Barrett@vuw.ac.nz)

***For any queries email or phone 022 463 5336****.*

**Curriculum vitae:**

|  |  |  |  |
| --- | --- | --- | --- |
| Tertiary Education | Dates  *dd/mm/yyyy* | | Degree(s) and Certificate(s) |
|  |  | |  |
| Employment History: | Dates | |  |
| (previous three jobs only) |  | |  |
| Present Employment History: | Dates | |  |
| (outline work/duties) |  | |  |
| Antarctic experience | Dates | |  |
| (outline Antarctic experience if any) |  | |  |
| Previous applications to TAA | | Dates |  |
|  | |  |  |
| All - anything relevant in support of the application.  Academic applicants - include  published papers, reports. | | |  |

**Project Outline:**

Please outline your project in 4 or 5 paragraphs and explain how the TAA grant will help achieve your objectives. Times New Roman 11 pt preferred. Visual (location map/conceptual diagram/photo) welcome.

*Hint: Compose text first then cut and paste into box*

|  |
| --- |
|  |

The Trans-Antarctic Association is a registered charity (No. 205773) and a company limited by guarentee (No. 18883)

**Budget:** ***(to nearest dollar)***

|  |  |  |
| --- | --- | --- |
| Please give an outline of your total expenditure, under the headings below: | | |
| *Type* | *Item* | *Cost* |
| Travel | Airfares | $….. |
|  | Other | $….. |
|  |  |  |
| Equipment (lab, field): | ……………………. | $….. |
|  |  |  |
| Services | ……………………. | $….. |
|  |  |  |
| Subsistence (give details) | ……………………. | $…. |
|  |  |  |
| Other Items (give details) | ……………………. | $….. |
|  |  |  |
| **Total planned expenditure** |  | $….. |
|  |  |  |
| **Funding from other sources** |  |  |
| Names/Sums: | ……………………..  ……………………..  **Personal Contribution** | $…..  $......  **$......** |
|  | **Balance** | **$…..** |
|  |  |  |

**Declaration:**

I declare that the above information is true and correct:

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*signed*) Date:

**TAA grant applied for:**

|  |  |
| --- | --- |
| Please list items from the above budget for which a grant is sought:  *(Note: TAA will not make salary grants, and will not normally pay subsistence. If subsistence is required a case needs to be made in the project outline section of the application)* | |
| *Item* | *Cost* |
| ……………………………………………………………………………….  ……………………………………………………………………………….. | $…..  $….. |
| ……………………………………………………………………………….. | $….. |
|  |  |
| Total Grant Sought | $..... |

**Referees:**

|  |  |  |
| --- | --- | --- |
| Please give the names of two referees whom you have contacted and who have agreed to comment on your application. Their references on your behalf **must** be submitted to TAA together with this application form. | | |
| Name: | REFEREE 1  ……………. | REFEREE 2  ……………. |
| Address: | …………….  …………….  ……………. | ……………  …………….  …………….. |
| Phone: | ……………. | …………….. |
| Mobile | …………….. | …………….. |
|  |  |  |