

**ANATS Ltd Bursary Application Form**

**Bursaries**

**Policy: Bursaries**

ANATS National Council and the State Chapters may offer bursaries to successful applicant members for approved activities. Bursary funding is dependent on annually available funds and the return benefit of professional development activities to the individual and / or to the voice teaching fraternity.

Bursaries will be offered to ANATS financial members (or in some instances to students of ANATS financial members) only under the following terms and conditions:

Applicants must be attending events that are in accordance with the Objects of the Company.

Recipients are required to write a report within 30 days of the event/s or activity and forward to the National President. If these criteria are not met the bursary must be re-paid in full to ANATS Ltd.

Recipients must also provide relevant documentation/receipts of expenditure.

Decisions regarding applications and recipients are final and correspondence will not be entered into.

Bursaries may not be transferred to another person or event other than that specified at the time of endowment.

All applications will be de-identified before being assessed by the selection panel.

**ANATS Ltd OBJECTS** (relevant to this application)

(a)  To encourage the highest standards in the art of singing and the teaching of singing;

(b)  To promote voice education and research at all levels;

(c)  To provide opportunities for members to meet together regularly at national, state, territory or regional levels;

(d)  To provide regular communication to Members.

Please complete the following application:

**1. Applicant** **Details**

|  |  |
| --- | --- |
|  | **Applicant to complete** |
| Family name |  |
| Given name |  |
| Email address |  |
| Home address |  |
| Home phone |  |
| Mobile phone |  |
| ANATS member since (year) |  |
| ANATS Chapter |  |
| Please provide details of any ANATS Bursary you have previously received |  |

**2. Bursary Event**

ANATS Ltd 2018 National Conference

**3. Benefit/s**

*Please explain your reasons for applying for a bursary and provide a summary identifying the aims and benefits, both to your individual practice and the wider community, of your proposed Conference attendance. Since this application will be de-identified before assessment, please refrain from including your name or any other identifying information.*

**4. Budget**

*List all projected expenses and provide quotations in the table provided.*

*Please note that applicants are responsible for their own travel insurance.*

|  |  |
| --- | --- |
| **Item** | **Quoted Costing** |
| Airfare |  |
| Accommodation |  |
| Registration |  |
| Other |  |
| **Total** |  |
|  |  |

**6. Referees**

*Please supply two professional referees in support of your application.*

**1. Name**

Phone

Email

**2. Name**

Phone

Email

**7. Declaration (TO BE SIGNED BY APPLICANT)**

*I am a financial member of ANATS who is in need of financial assistance to attend the 2018 National Conference.*

*I understand that, should my application for a bursary be successful, on completion of attendance, I will submit a written report (500 – 1 000 words) of the entire event to ANATS Ltd within 30 days of the event that may be published in ANATS newsletters or social media.*

*I do hereby release to ANATS Ltd, its agents and employees all rights to exhibit all or part of this work in print and electronic form publicly or privately.In doing so, I acknowledge that my work may be edited.*

*If my application is successful and involves travel, I will forward ANATS Ltd a copy of my travel insurance policy and receipt in order for the bursary to be dispersed.*

*Bursaries may not be transferred to another person or event other than that specified at the time of endowment.*

*I certify that I am at least 18 years of age and the information I have provided in this application form is true and correct. I have read and agree to the terms and conditions of the ANATS Bursary Policy and am competent to execute this agreement.*

Name

Signed

Date