ANZAOMS OUTREACH & OVERSEAS AID COMMITTEE

GRANT APPLICATION FORM

1. Name

2. Trip Location – please include Country, City & Hospital

3. Date of Visit:   /   /   

4. Names and profession of all team members:

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<tr>
<th>Team Leader</th>
<th>Profession</th>
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<td>ANZAOMS Full Member: Yes / No</td>
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<th>Team Member</th>
<th>Profession</th>
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5. Purpose of mission:

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6. Primary Requirement for Funding:

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7. Please outline how you have funded this request to date:

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8. Please outline the breakdown of your funding request (include table & explanatory notes)

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TOTAL GRANT REQUESTED:
Explanatory Notes:

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__________________________________________________________________________

9.  Has funding been applied for elsewhere for this mission? If so, to whom and for how much?

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

10. What institutions, organisations, government authorities are associated with this mission?

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

11. Is this an ongoing or a new mission? If ongoing, please provide details of past missions.

__________________________________________________________________________

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__________________________________________________________________________

12. Does the project include training of local practitioners? If so, how?

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

13. How will ANZAOMS sponsorship be acknowledged?

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________
STATEMENT:

As the team leader of this mission, I agree to the following:

1. To support and follow the objectives of the ANZAOMS Outreach & Overseas Aid Committee, which are:
   - Share intellectual property in the organization of missions and in-country visits.
   - Facilitate and coordinate Members who wish to be involved in these missions.
   - Manage a budget to provide financial assistance upon application, by OOAC affiliated teams.
   - Assist in obtaining third party sponsorship for equipment, support and funding.
   - Liaising and coordinating with other humanitarian aid programs (e.g. RACS, RACDS), government bodies (e.g. AusAID, DFAT) or Indigenous Aid & Development Programs in Australia (e.g. Australian Government)

2. The contribution of the OOAC of ANZAOMS will be acknowledged in each publication of mission reports. The words that may be used in reports and other representations are: “Supported by a grant from The Australian and New Zealand Association of Oral and Maxillofacial Surgeons (ANZAOMS)”.

3. By entering into this Agreement, the OOAC and ANZAOMS neither directly nor indirectly endorses any activities, product or service provided, or to be provided by the ANZAOMS member or the mission, whether directly or indirectly related to this Agreement. The Recipient will not state or imply that this Agreement is an endorsement by the OOAC or ANZAOMS, or of its Council, employees or Membership.

4. The grant Recipient team and its individual members will not hold the OOAC or ANZAOMS liable in any way for any losses, damages (whether consequential or otherwise), costs or expenses directly or indirectly suffered by the Recipient (s) because of or in relation to the mission.

5. The grant recipient team and its individual members will indemnify and keep indemnified the OOAC and ANZAOMS and each of their respective officers, employees and advisers from and against all liabilities, losses, damages (whether consequential or otherwise), costs or expenses (including legal costs on a full indemnity basis) directly or indirectly incurred or suffered by the OOAC or ANZAOMS and each of their respective officers, employees and advisers from and against all actions, demands, claims, suits and proceedings arising out of the dissemination of any product or information associated with, or produced by, the mission, the nature of the mission or the manner in which the mission is conducted.

6. I commit to providing a written report to the Chairman of the Overseas Outreach & Aid Committee on the abovementioned mission within 4 weeks of returning from the mission and acknowledge that payment of the donation is contingent on this being provided.
7. I understand that this grant, if approved, will be paid upon my return from the abovementioned mission and I will provide all relevant supporting documentation including tax invoices, wherever possible, to substantiate my application, within 4 weeks of returning from the mission. I understand that if I do not submit relevant documentation within this time-frame, it is at the discretion of the Chairman as to whether this grant will be paid.

Signed:

Team Leader