

CQUNICARES ALUMNI DEVELOPMENT FUND APPLICATION FORM



This paperclip appears in sections where additional documentation must be attached to the application

PERSONAL DETAILS

CQUniversity student number:		Date of birth:	
First name (as enrolled):		Preferred first name:	
Last name (as enrolled):		Preferred last name:	
Job title:		Organisation:	



Please attach a copy of your current resume or a statement of your involvement with your chosen community organisation, including mission of the organisation, duration of your membership / association and positions held.

CONTACT DETAILS

Street address:			
Suburb:		State:	
		Post code:	
Mobile phone:		Preferred email:	

PAYMENT DETAILS

Bank name:		BSB:	
Account name:		Account number:	

SELECTION CRITERIA

What are you applying for funds for? Please describe what initiative or activity you are requesting funds for, and how this will contribute to your professional development and/or your contribution to a community organisation. (Max 500 words)

Please explain why the CQUniversity Alumni Professional Development grant is necessary. Why is your workplace or community organisation not covering the cost of this opportunity? (Max 250 words)

Simple budget - Please detail how much you are applying for (maximum \$1000) and provide a basic breakdown of the expenses you expect to incur to participate in this activity.

EXPECTATIONS OF PARTICIPATION

Expectations for participation in alumni program / grant acquittal - Failure to agree to these terms will result in your application being judged ineligible for funding.

Social Media: APD Grant awardees are expected to tweet and/or post on Facebook and/or LinkedIn on the CQUniversity Alumni social media sites about their experiences for the purposes of promoting the APD Grant program.

Blog: APD Grant awardees are required to provide the Alumni Office a typed narrative illustrating their experience and highlighting the community benefit. This will be used to announce and promote the APD Grant program.

Photo/Video: When possible, please provide photo/videos associated with the initiative to illustrate your experience.

Do you agree to the following?

Do you agree to acquit your grant after undertaking your activity, by writing a 500 word outcome report and supplying a photo about your experience?	
Do you agree to provide evidence of expenditure of your grant funding on the project detailed in your application?	
Do you agree to allow CQUniversity to use portions of your acquittal in promoting the alumni program and/or Alumni Professional Development Grants via social media, the World Wide Web, or printed collateral?	

STATEMENT OF AGREEMENT

If I receive a CQUniversity APD Grant, I understand that all funds will be made payable to me and are strictly for the use agreed upon by the CQUniversity Development and Alumni Relations Directorate, as detailed in this application.

I further understand that CQUniversity retains the authority to make and award grants at its sole discretion.

I am aware of the obligations expected of me (as described in the application).

I am prepared to fulfil these requirements.

If I receive funds, and the proposed project cannot be completed within the year that I receive funds, for any reason, I agree to return all of the funds to CQUniversity unless otherwise agreed by CQUniversity.

I hereby agree that I may be photographed, videotaped, audio-recorded, or quoted for CQUniversity media including but not limited to print, internet, audio, video, or any other electronic medium.

I further agree that CQUniversity has the right to use and incorporate, in whole or part, photographs, audio, video, or verbal quotations taken of/from me as a result of my participation in CQUniversity activities.

I understand that I am solely responsible for the withholding and/or payment of any and all income tax liability that my activities may give rise to.

Should I receive an APD Grant, I understand that the funds will be deposited in the bank account detailed in the application.

I, the undersigned, hereby certify that the information set forth in this application and supporting documentation is correct to the best of my belief.

Signature:		Date:	
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Please submit your application to alumni-enquiries@cqu.edu.au