Application for a WVPA travel grant



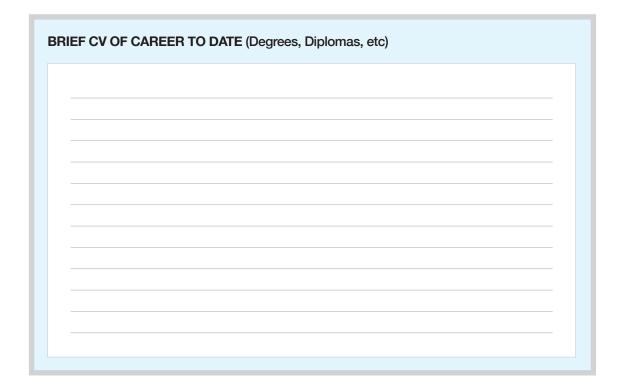
Please complete in **capital letters**, send it **signed and countersigned** by the Corresponding Secretary of your national branch (address available at www.wvpa.net).

If there is not one, send it to the Secretary/Treasurer of WVPA and then forward to awards@wvpa.net

One applicant per form - no group applications

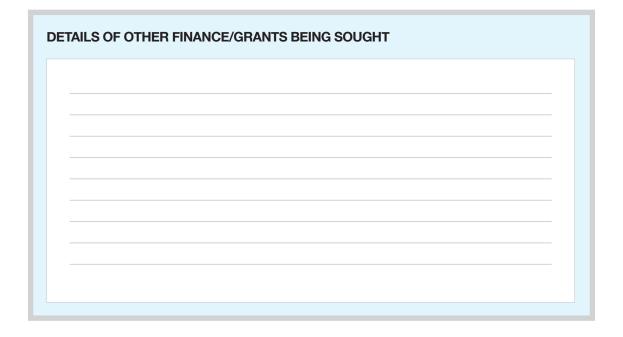
Title:	Qualifications:
Family Name:	
Forename:	
Institution:	
Address 1:	
Address 2:	
Town:	Post/Zip Code:
Country:	
Phone/ Fax:	
Emails:	
Date:	
	Signature:

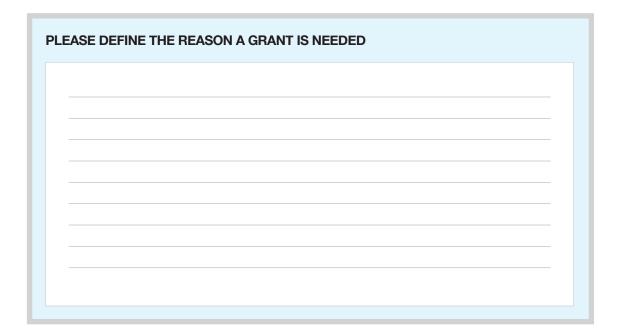
DETAILS OF EMPLOYMENT (job title, company name etc)		



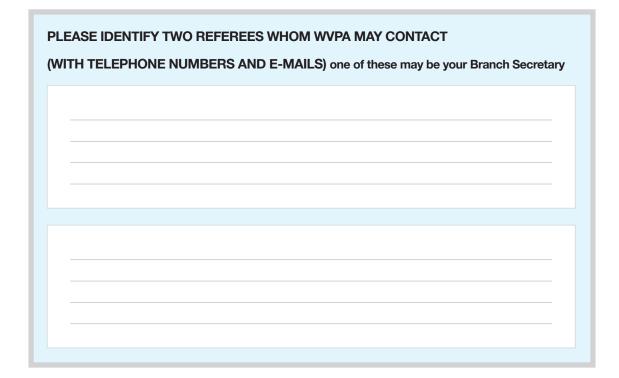
PURPOSE OF GRANT			

DETAILS OF PREVIOUS APPLICATIONS FOR WVPA GRANTS





WHAT WOULD BE THE CONSEQUENCES OF YOU NOT RECEIVING A GRANT?		



Signed _____

Date _____

Counter Signed (by officer of your branch)

