Conference Support Grant Program

**NADA Conference Support Application Form**

**Am I eligible? All boxes must be ticked**

[ ]  My agency is a current financial member of NADA

[ ]  The conference or presentation is related to the Alcohol and Other Drugs sector

[ ]  I have been accepted to present an oral conference paper or workshop

[ ]  The conference is being held in Australia

**Applicant Details *(please print clearly)***

|  |  |
| --- | --- |
| **Name** |       |
| **Position Title** |       |
| **Organisation and/ program name** |       |
| **Phone number** |       |
| **Email Address** |       |

**Details of Conference**

|  |  |
| --- | --- |
| **Conference Name** |       |
| **Conference Organiser** |       |
| **Conference Dates** |       |
| **Conference Location** |       |
| **Name of Presentation** |       |
| **Presentation Format** |       |

## Funding sought

## *Please refer to the Conference Support Guidelines for maximum allowances.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Cost Item** | **Notes**  | **Cost to attend conference** | **Funding sought from NADA**  |
| **Registration**  | Early bird/1 day/ full etc**.**  |  |  |
| **Accommodation** | No. Nights       |       |  |
| **Travel**  | Method of travel & No. Kms if by car       |  |  |
| **Totals** |  |  |
| **Other contributions** |        |

## Additional Information

|  |
| --- |
| **Have you included your abstract and acceptance letter? (if no, please state why)** |
|  |
| **Have you registered to attend the conference? (if no, please state why)** |
|  |
| **Has your manager endorsed your participation in this conference?**  |
|  |
| **Managers Name** |  |
| **Managers Phone No.** |  |
| **Managers Email** |  |

## Applicant’s Agreement

[ ]  I have read and understood the [Conference Support Guidelines](https://www.nada.org.au/about/what-we-do/grants-subsidies/)

[ ]  I have attached my abstract and acceptance letter to this application

[ ]  I will submit a reimbursement form and invoices within one month of the event if successful

|  |  |
| --- | --- |
| **Signature *(not required if emailing)*** |  |
| **Date** |  |

Submit your application to traininggrants@nada.org.au. If you do not receive confirmation of receipt of your application within five working days please call 02 9698 8669.

For any enquiries please call 02 9698 8669.