

# SLANZA Study Grant Application Form for study in 2010

Please print this form and complete all details. Sign it and send your completed application to:

**SLANZA Secretary, PO Box 631, Palmerston North 4440** by 31<sup>st</sup> October, 2009

Name

School

**Position**—please tick the job title that best suits your main library related responsibilities:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Library assistant | <input type="checkbox"/> Library Manager | <input type="checkbox"/> Teacher with library responsibility |
| <input type="checkbox"/> librarian         | <input type="checkbox"/> Teacher Aide    |  |

SLANZA region

Period of Membership

**Contact details:**  
Home postal address:

Phone:  Fax:

Email:

Work postal address:

Phone:  Fax:

Email:

- Letter of Application enclosed       Principal's letter of support enclosed

**Signed:** ..... **Date:** .....