

SLANZA Study Grant Application Form for study in 2007

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

SLANZA Secretary, PO BOX 36-511, Merivale, Christchurch by 31st October, 2006

Name

School

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

Library assistant

Library Manager

Teacher with library
responsibility

librarian

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:**