

Under the patronage of Dr. William J. Pryor A.O

President: Dr Olatunji Nasir, Nigeria Secretary: Dr Sarah Wilkinson-Eytle, Jamaica

ABN: 32 028 718 664

CVA MEMBER COUNTRY SMALL PROJECT FUNDING APPLICATION

BACKGROUND:

"The Mission of the Commonwealth Veterinary Association is to promote the veterinary profession within the Commonwealth by encouraging the highest professional standards of education, ethics and service in order to advance animal health, productivity and welfare so as to improve the quality of life of all its peoples."

To facilitate the CVA aims and objectives, an annual allocation of funds will be made available to applicants who have veterinary or paraveterinary projects that meet the key selection criteria outlined in the application form.

Projects up to the value of \$AUS 10,000.00 will be considered. Projects may have multiple sources of funds and partners.

A detailed report describing the completed project, associated outcomes and acquittal of funds will be required at the conclusion of each financial year in which the project is undertaken.

Examples of previous CVA supported projects can be found at https://www.commonwealthvetassoc.com/programs/cva-projects/

ELIGIBILITY:

Applications will be accepted from current financial member countries of the CVA. Applications must be for approved by the country CVA councillor on behalf of the country professional organization prior to submission to the CVA executive committee.









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KEY SELECTION CRITERIA (to be completed by the applicant):

LIST THE PROJECT LEADER AND TEAM MEMBERS?				
2.	LIST ANY CO-FUNDERS OR COLLABORATORS INCLUDING CONTACT DETAILS			
3.	WHAT GAP/NEED WILL THIS PROJECT ADDRESS? (Identify the specific needs of the targe			
	group and/or the community in which the service is to be delivered including evidence			
	about the needs of the target group/s and location/s)			









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HOW WILL THE PROJECT MEET THIS COMMUNITY NEED? (Demonstrate how the proposed service or project will benefit the target group and community including intended benefits, and evidence to support the service approach/project. This may include collaboration and linkages with other organizations and service providers)
WHAT IS THE START DATE OF THE PROJECT?

info@commonewealthvetassoc.com







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6.	LIST ANY SIGNIFICANT PROJECT MILESTONES AND THEIR EXPECTED DATES
7.	WHAT IS THE COMPLETION DATE OF THE PROJECT?
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8.	PROVIDE AN OUTLINE OF THE BUDGET FOR THE PROJECT INCLUDING THE AMOUNT
	REQUESTED FROM CVA AND HOW THE FUNDS WILL BE SPENT









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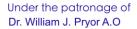
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9.	DESCRIBE THE EVIDENCE/EVALUATION OF THE PROJECT OUTCOMES











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	a.	CVA Councillor:
		Signature
		Name
	b.	Representative of Veterinary Association:
		Signature
		Name
		Position
2.	SEND '	OUR COMPLETE APPLICATION FORM TO info@commonwealthvetassoc.com





