NEW TEAM/NEW PROJECT FUNDING APPLICATION

orthopaedic outreach AUSTRALASIA

PROPOSED TEAM VISIT

Country	City	Length Of Visit (dates of travel DD/MM/YY)

PROJECT BRIEF - max 30 words

PROJECT SUMMARY - max 120 words

PROJECT PARTICIPANTS

TEAM LEADER

Name: _____

Phone: _____

Email: _____

OTHER VOLUNTEERS

Name	Role/Profession

IN-COUNTRY LOCAL KEY CONTACTS

Name	Role	Email	Phone No.

DESCRIPTION OF IN-COUNTRY FACILITIES

Eg brief description of what is known about facilities and support that will be available.

PROJECT OUTCOME AND IMPACTS

What are the main aims of this trip?

OUTCOME MONITORING

How will you objectively measure the success of this trip? eg: number of teaching and training sessions

PROJECT BUDGET

Expense category cost per person ($) no. Of people

CATEGORY	COST PER PERSON ($)	No. OF PEOPLE	TOTAL COST ($)
Flights			
Accommodation			
Transfers			
Visas / Registration			
Training / Workshop Supplies			
Other (Specify)			
		TOTAL EXPENSES	

DECLARATION

This application supports Orthopedic Outreach Australasia's mission to promote sustainable, development-focused orthopaedic care through structured engagement and measurable impact.

Establishing contact with in-country Australian government officials both in advance of team activity and while in-country remains an important element of our programs.

Team funding is limited and may not cover all activity expenses, however please include all anticipated costs for the activity to assist in future planning.

APPLICATION WAS SUBMITTED BY : _____

FIND AN ACCEPTABLE FILLED OUT EXAMPLE OF THE FORM HERE (INSERT LINK)

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Instructions to submit:

Please save your completed form using:

Team leader surname_destination_year

Eg Gumley_Cambodia_2026

Then email to admin@orthoreach.org.au