



Association of Stoma Care Nurses UK

Jean Preston Fund Grant Application

Name:	
Job Title:	
Organisation:	
Preferred Mailing Address:	
Preferred Contact Telephone No:	
Email Address:	
Are you a member of ASCN UK:	
Grant to be used for, please indicate:	<ul style="list-style-type: none"><input type="radio"/> Professional Study day<input type="radio"/> Research<input type="radio"/> Audit<input type="radio"/> Personal development project<input type="radio"/> Other (please specify below)
Summary of Purpose of Intended Grant:	
Key Outcomes Expected on Completion of Study:	
Cost:	Details of total cost requested : Proposed grant amount requested from Jean Preston Fund

Please return completed form and supporting documents to: ascnuk@in-conference.org.uk
ASCN UK Secretariat.