



The Douglas Hill Memorial Foundation

Application Form for Assistance

Secretary: Dr Suzanne Bougher
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Beaconsfield WA 6162
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Name: Age:

Address: Phone:

Are you presently on Austudy? **Yes/No**

If not, do you support yourself financially? **Yes/No**

Medical School (name and year):

Hospital:

Details of Project:

Organisation with whom you will work:

Have you been accepted? **Yes/No** If not, at what stage are the plans?.....

Will this organisation help with any costs? **Yes/No** Travel/Living costs?

Outline details of your proposed project:

Proposed itinerary (dates of arrival and departure and place):

Anticipated Costs: Travel Living Expenses

How do you propose to finance this? (Please give a breakdown of sources, i.e, own savings, parent gift, loan, bank loan etc.)

Write up to half a page as a Testimony, past and present, to Christ in your life, discussing how your faith affects your life and studies.

Write up to half a page on your reasons for wanting to work in a developing country and state what you hope to achieve from it.

Referees: Please ask two referees (your minister and a faculty teacher) to send a reference to the above address.

After completing this project I will be prepared to make a written report to D.H.M.F.

Signed Dated