

## ALUMNI ASSOCIATION ACTIVITY GRANT APPLICATION FORM

## Submit this application to:

Alumni Relations Manager, Advocacy and Recognition Advancement Office University of Melbourne Victoria 3010 AUSTRALIA

Tel: +61 3 8344 1746 Email: alumni-office@unimelb.edu.au



## ALUMNI ASSOCIATION ACTIVITY GRANT OUTCOME REPORT

Name of Alumni Association:				
Name of contact person for this report:				
Email address:				
Phone Number:				
Signed:	Date:			
No of attendees/ number of alumni invo	olved:			
Please also attach any photos taken at th	ne activity and update	ed contact detail	s of alumni (if collec	cted)
How was the University acknowledged?				
Outcomes for the Alumni Association:				
Follow up actions emerging through this	activity			
Recommendations for future activities/	things learned			
Expense report (against proposed budge	et):			
		Projected	Final	
		(AUD\$)	(AUD\$)	
Total costs				
Total revenue				
(including other sources of funding eg: s sales)	ponsorship, ticket			

## Submit this grant outcome report within four weeks of the activity to:

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