

# Preventive and Social Medicine

## Request for Research Student Funding Contribution

The purpose of this funding is to contribute to students' research-related costs for which no other funding is available.

Please read the PSM Research Student Funding Policy before completing this form.

Examples of eligible expenses include: koha/gifts for participants, research manaaki such as kai, data acquisition, research travel, contribution to conference attendance, and dissemination of findings to community.

Please note: the cost of publishing articles is excluded; and that Health Sciences offers conference travel funding for PhD students.

### Student Details:

Name:
Room/Extension:
Email:
Qualification : Start date of study: Year of study:

### Supervisor details:

	<i>Supervisor Name</i>	<i>Department</i>	<i>EFTS Split %</i>
<i>Primary Supervisor</i>			
<i>Co-Supervisor 1</i>			
<i>Co-Supervisor 2</i>			
<i>Co-Supervisor 3</i>			

**Prior support** - Have you received funding support from the DSM Research Student Support Committee (prior to 2023) or from PSM's Research Student Contribution Fund? Please provide details (date, amount spent, purpose):

--

**Purpose of and justification for funding** – what do you require the funding for and how would it assist your studies?

--

**Budget** – Please supply an itemised and specific breakdown of costs (and attach supporting documents where applicable), and an expected timeline for expenditure. You should discuss your needs with your supervisor.

Item Number	Detailed description	Date of expenditure	Cost in NZ\$
1			
2			
3			
4			
5			
<b>TOTAL</b>			

**Supervisor Endorsement** – please ask your supervisor to endorse your request.

<i>Supervisor Name:</i>
<i>Supervisor Signature:</i>
<i>Supervisor Comments:</i>

When your supervisor has endorsed your request, please forward this form to the research student administrator for consideration at the next Research Advisory Committee.

[researchstudentadmin-psm@otago.ac.nz](mailto:researchstudentadmin-psm@otago.ac.nz)

**Chair, Research Advisory Committee to complete:**

<i>Funding Request:</i> Approved / Declined / Returned to Student for Query or Modification
<i>Signature:</i>
<i>Date:</i>