|  |  |
| --- | --- |
| LOGO2 | Charitable Trust of the Auckland FacultyRoyal New Zealand College of General Practitioners**REPORTING FORM****for** **research, educational or travel awards** |

**Grant details**

**Name:**

**Grant awarded:** research travel education *(tick/circle one)*

**Amount awarded:**

**Date/period of activity:**

**Brief description of grant awarded/research title:**

**Report**

*Describe the outputs related to the activities described above (present and/or future):*

*Describe how the activities above have benefited, or will general practitioners (GPs). If GPs are to benefit in the future, please describe how this will occur:*

*Personal reflection regarding the activities described above:*

*Please complete and forward this form to the trust secretary no later than one month following the conclusion of your grant activity as specified in your award. If you are undertaking a long term project you will need to submit an annual report on the anniversary of receiving your grant.*

*Email to the Trust Secretary, Dr Jim Lello ( email* *annajim@xtra.co.nz* *with a copy to jm.lello@auckland.ac.nz)*