



MASSEY UNIVERSITY
INSTITUTE OF EDUCATION
TE KURA O TE MĀTAURANGA

Doctoral Research Grant (DRG) Application

(Incomplete applications will be returned)

Applicant's Name: _____ ID Number: _____

Address: _____

Email Address: _____ Phone: _____

Supervisor's Name: _____

MUHEC approval/notification number (if received): _____

Please note all applications require MUHEC approval/notification before funds will be fully approved.

Doctoral Research: PHD Thesis (360 credits) EdD Thesis (240 credits)

The grant provides \$1,500 per year up to a maximum of \$4,500, contingent on satisfactory progress as indicated in 6 monthly progress reports or with the support of your supervisor.

In which year did you begin your Doctoral study: _____ (Grant available in years following successful confirmation)

Title of Research Being Undertaken:

Project Budget – General description of how funding will be used. *Please consult with your supervisor to determine how the \$1,500 will be used.*

Amount Requested \$

Provide a description of how the funding will support your research:

Provide details of your bank account into which the funds can be paid

Documentation must show your name and bank account number that is pre-printed on any of the following:

- Internet banking screen shot
- Top of a bank statement

Evidence as requested above has been attached.

Previous Support from GRF/DRG for this Project

Year(s)	Sum (\$)	Purpose

Supervisor Sign Off

I confirm that the student’s proposed expenses are relevant and reasonable for supporting the conduct of their research.

Supervisor: _____

Supervisor signature: _____

Date: _____

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Total Amount Requested: \$ _____

Total Amount Approved: \$ _____

Approval on Behalf of Doctoral Research Grant

Name of Approver: _____

Signature: _____

Date: _____

Please email the completed application form and bank details to:

Sue Richards - S.V.Richards@massey.ac.nz