



**Project Grant Application
Endorsement Form**

Short Description of Project Application

Project Applicant

I confirm that:

- I meet the eligibility criteria for the grant I am applying for.
- I am a member of WA Museum staff or a research associate applying on behalf of the WA Museum.
- I confirm that I do not owe any reports or money (thru WAM Department) to the Foundation for the WA Museum as a result of previous funding or grants.
- I have the appropriate level of insurance for the activities that are subject of this grant application.
- I agree to notify the Foundation for the WA Museum immediately should I receive alternative funding for the project that is subject to this application, or if my eligibility against the stated criteria changes in any way.
- That I, or a member of my team, will be available for the public voting event.

Name of Applicant			
Signature		Date	

Head of Section

I/we certify that all the information given in this application is correct, and I/we will accept the decision of the Foundation for the WA Museum as final.

Name of Head of Section			
Signature		Date	

Head of Department

I certify that this project directly supports the WA Museum's strategic objective as per the current strategic plan and that this project does not fall within the current WA Museum budget.

Name of Head of Department			
Department			
Signature		Date	