

AMA QUEENSLAND FOUNDATION 2022 Flood Assistance Grants



Application Form

The AMA Queensland Foundation is committed to helping Queenslanders in need. Do you know someone who has suffered significant hardship as a result of the Queensland floods in 2022?

People seriously impacted by floods can apply for **grants of \$1,000** by completing the application form including details of a referring doctor or medical practice. For further information on the available grants, contact AMA Queensland Foundation Coordinators on **(07) 3872 2222** or email **amagfoundation@amag.com.au**



APPLICATIONS CLOSE 5PM MONDAY 2 MAY 2022 OR UNTIL ALL GRANT FUNDING HAS BEEN EXPENDED.

AMA QUEENSLAND FOUNDATION 2022 FLOOD ASSISTANCE GRANTS

Application Form

| 1. | Name a | nd contact details of applicant |
|---|------------|---|
| | ○ Mr | ○ Mrs ○ Miss ○ Ms ○ Other |
| | Family n | ame: |
| | First give | en name: |
| | Second | given name: |
| | Date of E | Birth:/ |
| | Home pl | none: Mobile: |
| | Email ad | dress: |
| | | place of residence at time of flood: |
| | Principal | place of residence now (if different to above): |
| 2. | _ | of Aboriginal or Torres Strait Islander Australian descent? |
| | | nis question is voluntary and will not affect your payment. If you do answer the information p us to continue to improve services to Aboriginal and Torres Strait Islander Australians) |
| If you are both Aboriginal and Torres Strait Islander Australian, tick both b | | e both Aboriginal and Torres Strait Islander Australian, tick both boxes: |
| | No | Yes – Aboriginal AustralianYes – Torres Strait Islander Australian |
| | Are you | of Australian South Sea Islander descent? |
| | ○ Yes | ○ No |
| 3. | Are you | living in Australia permanently? |
| | ○ Yes | ○ No |
| 4. | Are you | an Australian citizen who was born in Australia? |
| | | you will need to provide proof of your Australian resident status e.g. citizenship papers, passport or other documentation |
| | ○ Yes | |

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| 5. | Date you and/or your dependent child(ren) were affected by the disaster? |
|----|---|
| | / to/ |
| 6. | Please provide details of the hardship you have encountered: Feel free to attach photos and/or documents to support your statement (not compulsory). |
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Application Form

| 7. | How will an AMA Queensland Foundation grant assist you? |
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| 0 | Name and contact datails of referring dector / or practice stomp. |
| 0. | Name and contact details of referring doctor / or practice stamp: O Dr O Prof O Other |
| | Family name: |
| | First given name: |
| | Second given name: |
| | Practice address: |
| | Practice phone number: |
| | AMA Queensland membership number (if applicable): |
| 9. | Signature of applicant stating that the information provided is correct. 10. Signature of referring doctor who is supporting your application. |

Submit form



Submit your application, including all supporting documentation to: amagfoundation@amag.com.au The AMA Queensland Foundation is pleased to award a limited number of grants which will be prioritised to those judged to be most in need. The AMA Queensland Foundation Board will select the recipients and their decision will be final. The successful applicants and their supporting doctors will be notified as soon as possible.

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