

NZOHA Postgraduate Scholarship and Research Fund

Background

- The scholarship is to support oral health practitioners in exploring novel ideas related to our professions or succeeding in postgraduate education.
- There are two rounds annually. The total maximum amount for the fund is up to \$5,000.00 for each round.
- Each application will be discussed by the executive committee, and the fund up to \$5,000.00 will be allocated based on the assessment outcome. The full amount of the proposed budget may not be granted.
- The outcome will be communicated individually at the end of the application month.

Eligibility Criteria

- The primary applicant must be a full member of the association who held the membership for the past two consecutive years.
- The primary applicant must be the primary researcher (lead researcher) of the project OR;
- The primary applicant must be enrolled in a postgraduate programme offered in New Zealand.
- The research project should address the needs of the community for a research grant.
- The primary candidate should not have received this funding in the same calendar year.

NB: Te Ohu Pūhino Ora o Aotearoa - NZ Oral Health Association are an organisation which supports oral health equity in Aotearoa New Zealand. Applications for postgraduate programmes which add the Adult Scope for Dental Therapists, or removal of restorative care for over 18 year-olds for oral health therapists will not be accepted at this time.

Terms and Conditions

- Any actual, potential, and perceived conflict of interest must be disclosed.
- A successful candidate can only receive one funding for each year.
- A successful candidate should submit the progress report by **1 October for the first grant** round or **1 May of the following year for the second grant round**. This will be used by the association to communicate with the members. You are required to check the Grant Report Form for more information.
- A successful candidate should acknowledge the association in any meaningful way.
- A successful candidate should consider submitting a manuscript to the Australian and New Zealand Journal of Dental and Oral Health Therapy (ANZJDOHT).
- A successful candidate should be prepared to present the outcome via webinar to NZOHA members.

Criteria for Evaluation

- Appropriate postgraduate study
- Relevance of the research project to the community
- Clear question, design, and research plan
- Appropriateness of research design to answer the research question
- Feasibility of the budget

For more information or to submit the application, email Chris Heuiwon Han (engagement@nzoha.org.nz)





NZOHA Postgraduate Scholarship and Research Fund Application Form

1. Contact Information

First name:	Last name:	
Address:		
Phone:	NZOHA membership	
	no.:	

Budget amount request (in NZD):

2. Research Project Detail

Please complete this section if the grant is to support a research project. You may want to complete both sections if it is applicable.

Research title	
Authors /	
Researchers (list all	
personnel)	
Affiliation of the	
primary applicant	

3. Postgraduate Study Detail

Please complete this section if the grant is to support your postgraduate study. You may want to complete both sections if it is applicable.

Postgraduate	
Programme	
Name of the	
institute	
Applicant's qualification	
quantication	



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4. Required Attachments

- 1. Research proposal (if application) including:
 - a. Brief introduction to the study topic
 - b. Purpose of study
 - c. Research question
 - d. Significance of study
 - e. Methods
 - f. Current research progress
 - g. References
- 2. Postgraduate enrolment information and invoice (if application) including:
 - a. Details of the qualification
 - b. Your motivation to study
 - c. Brief explanation of how your postgraduate study will benefit you and the profession
 - d. Other relevant information
- 3. Budget proposal for the grant application
- 4. Other funding received for the research project or the postgraduate study (if any)

I understand and agree with the terms and conditions. I declare that the information provided by me in this application is true and complete. I also confirm that I will submit my grant report before the required date.

Applicant signature:

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Date: _____



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