



WAVD
WORLD ASSOCIATION FOR
VETERINARY DERMATOLOGY

www.wavd.org

Application for Financial Support (WAVD)

Date of application:

Name of Member, Provisional Member or Affiliate Organization:

Name & contact information for individual making application on behalf of organization:

Fiscal year of financial support (01 June to 31 May):

Detailed description of the project or activity requiring support; including but not limited to the proposed purpose, content, education value and potential benefit of such a project or activity to the applicant and the global veterinary dermatology community

Amount requested [please provide a detailed budget]

Approximate dates of when money will be needed and used:

How WAVD monetary support will be acknowledged:

Applications for financial support should be mailed in electronic copy format to:

Dr Catherine Outerbridge, Secretary of WAVD
caouterbridge@vmth.ucdavis.edu