

# The Jack Ilott Oral History Education Operating Fund

## Policy & application form

**Author:** Oral History Centre, Outreach Services, Alexander Turnbull Library, National Library of New Zealand  
**Last updated:** 15 December 2011  
**CLIO reference:** 181550 & 180992

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The Jack Ilott Oral History Education Operating Fund is managed by the Alexander Turnbull Library Endowment Trust, an independent trust that supports the work of the Library.

### Policy

1. The purpose of the Fund is to promote standards in the use of oral history technique as a means of documenting New Zealand's past and contemporary history.
2. The funds are available to assist with activities which fall within the following categories:
  - Education in the use of oral history;
  - Training in oral history techniques, for example recording, interviewing, documentation, storage and preservation of oral history material;
  - Subsidising of attendance at oral history workshops, seminars, training exercises etc;
  - Purchase of equipment to be used for approved training purposes;
  - Any other educational, training or project activities deemed by the Trustees to serve the purpose of the funds.
3. Applications for assistance are to be made Jack Ilott Oral History Education Fund, Oral History Centre, Outreach Services, and are to include a completed questionnaire giving details of the proposed work or training, together with details of the background of the applicant as it relates to the application.
4. Allocations may be up to \$500.

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**JACK ILOTT ORAL HISTORY EDUCATION FUND  
APPLICATION FOR FINANCIAL ASSISTANCE**

**NAME (Individual/group):** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**DATE OF APPLICATION:** \_\_\_\_\_

**SECTION A**

**REASON FOR WHICH FUNDS ARE SOUGHT (if an oral history project give title and aim and answer questions in Section B):**

**AMOUNT SOUGHT: \$** \_\_\_\_\_

**SECTION B**

**WHAT STAGE IS THE PROJECT AT?** Proposed / Work in progress / Completed

**HOW MANY WORKING ON THE PROJECT?** \_\_\_\_\_

**DURATION OF PROJECT (weeks / months / years):** \_\_\_\_\_

**WHAT IS THE INTENDED USE OF THE RECORDINGS AND ACCOMPANYING MATERIAL?**

\_\_\_\_\_

**WHAT EQUIPMENT WILL BE USED?** \_\_\_\_\_

**WHERE WILL THE MATERIAL BE STORED?** \_\_\_\_\_

**WHAT TYPE OF ACCESS WILL BE AVAILABLE?** \_\_\_\_\_

**FUNDING REQUIRED (provide budget, on separate page if necessary):**

\_\_\_\_\_

\_\_\_\_\_

**OTHER SOURCES OF FINANCE /GRANTS RECEIVED:** \_\_\_\_\_

\_\_\_\_\_

**RELEVANT EXPERIENCE OF APPLICANT:** \_\_\_\_\_

**SECTION C**

**DETAILS OF PREVIOUSLY RECORDED MATERIAL:**

**No. of hours recorded:** \_\_\_\_\_

**No. of interviews recorded:** \_\_\_\_\_

**Technical quality of recordings:** \_\_\_\_\_

**Equipment used:** \_\_\_\_\_

**Where the material is located:** \_\_\_\_\_

**SECTION D**

**TWO REFEREES: Please give names and phone numbers**

1. \_\_\_\_\_

2. \_\_\_\_\_

**If granted funds from the Jack Ilott Oral History Education Fund I / we undertake to use them for the purpose for which they were sought within six months or return them to the Alexander Turnbull Library Endowment Fund.**

**I / we undertake to provide a brief report on the activity for which assistance was sought by seven months from receipt of cheque.**

**Signature:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Organisation (if applicable):**  
\_\_\_\_\_  
\_\_\_\_\_

**Please return form to:**

**The Secretary  
Jack Ilott Oral History Education Fund  
Oral History Centre  
Outreach Services  
Alexander Turnbull Library  
PO Box 12349  
WELLINGTON**

**Telephone (04) 474 3977  
Fax (04) 474 3160**