



**Nature of the assistance required:**

---

---

---

---

---

---

---

---

---

---

---

**Please provide the names of two referees to support your application:**

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

**Relationship:** \_\_\_\_\_

**Contact No:** \_\_\_\_\_

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

**Relationship:** \_\_\_\_\_

**Contact No:** \_\_\_\_\_

All enquiries and applications should be directed to:

Motor Industry Foundation  
Locked Bag 13  
Belmont WA 6984

Telephone: (08) 9453 7900  
Facsimile: (08) 9453 7999  
Email: [crockman@mtawa.com.au](mailto:crockman@mtawa.com.au)