



FNQ RN Scholarship Application Form



Background on this FNQ RN Scholarship

The Community & Practice Nurse Association – Far North Queensland Branch is closing and the remaining FNQ CAPNA financial members have discussed the option of donating their remaining funds (\$13756.65) to the Sexual Health Society of Queensland for the purposes of establishing a scholarship supporting attendance at the annual Australasian Sexual Health and/or HIV conference for one (1) FNQ registered nurse per year. Here after referred to as the *FNQ RN Scholarship*.

For the purposes of this agreement FNQ is defined in line with the CAPNA Constitution current at time of the FNQ CAPNA closure as an area including Tully, and north of latitude 17.93337 degrees south and inclusive of Karumba and east of longitude 140 degree 10.08 minutes east.

The remaining members at the time of the FNQ CAPNA closure were unanimous in donating these funds to the SHSQ as the Society was deemed to have similar objects to CAPNA and the SHSQ constitution has a clause that prohibits distribution of assets to any member.

Purpose

That the SHSQ agree to provide financial assistance (up to \$1200.00) for one (1) Far North Queensland Registered Nurse to attend the Annual Australasian Sexual Health and/or HIV Conference.

Assessment and eligibility criteria

The successful applicant needs to be a financial member of the Sexual Health Society of Queensland. Applicants must address the following criteria. The decision of the Sexual Health Society of Queensland committee on the allocation of funds is final. No correspondence will be entered into.

- Financial assistance from any other source(s) must be declared.
- Estimated travel costs by the least expensive appropriate means must be provided
- Applicants will be required to attest to the accuracy of their application for the Scholarship and have their supervisor sign their form.
- The applicant must notify the SHSQ secretary of any changes to their circumstances (e.g. funding received from another source after application to the Sexual Health Society of Queensland for the FNQ RN Scholarship)
- Committee and ordinary members of the SHSQ are eligible to apply for the FNQ RN Scholarship funding, however, they will be not be eligible to participate in any decision-making activities associated with the allocation of funds.
- Applicants found to submit false or misleading applications will be referred to the SHSQ Executive Committee and will be ineligible for subsequent assistance and possible expulsion from the SHSQ.



FNQ RN Scholarship Application Form



- Provide in writing:
 - Evidence that they work in FNQ,
 - A description of their current role and;
 - How attendance at the conference will enhance/ develop your knowledge or skills in relation to your work.

Conditions of funding

The successful applicant will be required to either:

- Submit a written report within one month of returning from the conference that includes
- A brief description of how attending this conference had benefited your professional development and clinical practice and;
- an overview of a minimum of 3 presentations attended.

Or

- Participate in a formal feedback session to members at the next SHSQ clinical meeting.

How to apply

Scholarship applications open four months prior to the conference opening. Download and complete the application form and [email](#) it to the Secretariat. The successful applicant will be informed two months prior to the conference opening. We acknowledge that the date for the conference varies annually so watch the [ASHM](#) and [ASHA](#) website for announcements

Payment

- The successful applicant will receive the funds via Electronic Bank Transfer when the SHSQ executive committee receives the original receipts for registration and or airfares



FNQ RN Scholarship Application Form



Application Form

First name: _____ Surname _____

Address: _____

Telephone: _____ Fax _____

E-mail: _____

Employer: _____

Workplace: _____

Position: _____

Conference name: _____

Dates attending conference: ___ / ___ / ___ to ___ / ___ / ___ (inclusive)

Have you registered? Circle Yes No

Have you submitted a paper or poster? circle Yes No

Have you received notice of acceptance? circle Accepted Declined Awaiting

Are you receiving any other financial assistance to attend the conference from your workplace or other source?
circle Yes No

If yes declare source of funding and amount _____

Conference registration fee: \$ _____

Airfare: _____ \$ _____ from _____ to _____

Other: _____ \$ _____ details _____

Please attach photocopies of conference registration form and receipts (if applicable.)



FNQ RN Scholarship Application Form



Applicant Signature

I hereby agree to abide by the FNQ RN Scholarship guidelines as determined by the Sexual Health Society of Queensland Committee

I acknowledge that the committee's decision is final, and no correspondence will be entered into regarding the decision.

Signed: _____

Date: ___ / ___ / ___

Supervisor's Signature

I have read the assessment and eligibility criteria for FNQ RN Scholarship and declare that

_____ (Insert employee's name) is not eligible or supported for financial assistance through the workplace or from other sources.

Signed: _____

Date: ___ / ___ / ___