



# Scholarship Application Form

## Purpose

To provide financial assistance (up to \$1200.00) for one member of the Sexual Health Society of Queensland to attend the Australasian Sexual Health and/or HIV Conference (generally held in September /October each year). One scholarship only is awarded each year.

## Assessment and eligibility criteria

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.

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

## Conditions of funding

You will be required to either:

1. Submit a written report 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. This report is due within one month of returning from the conference. Or;
2. Participate in a formal feedback session to members at the next Sexual Health Society of Queensland clinical meeting.

## How to apply

Applications open on 1st March each year. Complete the application form and or email it to [Secretariat@shsqld.com](mailto:Secretariat@shsqld.com) by last Friday in July of the current year. The successful applicant will be informed by 1<sup>st</sup> August of the current year (at the latest)

## Payment

Electronic Bank Transfer will be made to the successful recipient when the society receives the original receipts for registration and or airfares.



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## 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.)



