



Purpose

That the SHSQ agree to provide financial assistance for registrations (\$280.00) for four (4) members to attend the VIRTUAL hiv & aids + sexual health 2020 Conference.

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 two-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) a brief description of how attending this conference had benefited your professional development and clinical practice and;
 - b) 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

Scholarship applications open four months prior to the conference opening. 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

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



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.)



Applicant Signature

I hereby agree to abide by the sponsorship guidelines as determined by the Sexual Health Society of Queensland Committee. I am a current financial member of the Society and have been so for _____. (Insert length of membership)

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 sponsorship and declare that

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

Signed: _____

Date: ___ / ___ / ___