

**AUSTRALIAN AND NEW ZEALAND SOCIETY OF NEPHROLOGY**

145 Macquarie Street Sydney NSW 2000 AUSTRALIA  
Tel 61 2 9256 5461 Fax 61 2 9241 4083 Email anzsn@nephrology.edu.au

ABN 87 008 505 502



**APPLICATION FOR SPECIAL PURPOSE TRAVEL GRANT**

**NAME:** \_\_\_\_\_

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

**DATE OF BIRTH:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**FAX:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**NAME OF MEETING/TRAINING/WORKSHOP:** \_\_\_\_\_

**DATES:** From: \_\_\_\_\_ To: \_\_\_\_\_

**HOSPITAL OR UNIVERSITY POSITION(S):** \_\_\_\_\_

**CURRENT FINANCIAL ANZSN MEMBER** (includes subscription for 2018)  YES  NO

**RESEARCH?**  FULL TIME  PART TIME  No

**ENROLLED in PhD or equivalent?**  YES  NO **ADV. TRAINEE**  YES  NO

**ANNUAL INCOME** (estimated from all sources including private practice): \_\_\_\_\_ p.a.

**SIGNATURE OF APPLICANT:** \_\_\_\_\_ **DATE:** / /

**PRINT NAME OF SUPERVISOR:** \_\_\_\_\_

**SIGNATURE OF SUPERVISOR:** \_\_\_\_\_

Please note, as Supervisor, you are confirming the applicant's eligibility.

Abstract: Submitted\*  Accepted oral  Accepted poster  Rejected

\*Please advise as soon as you receive notification about whether your abstract has been accepted or rejected and forward a copy of the notification letter to the Society Office.

**Eligibility Criteria:** To be eligible for A Special Purpose Travel Grant, the applicant must:

- have been a Member of ANZSN for a minimum of 12 months by the date of the meeting;
- be a current financial Member i.e. the current year's subscription fees have been paid and there are no outstanding arrears for any prior years at the time of application;
- not exceed the Membership Financial Support Limit (includes this application and all previous support for a Special Purposes Travel Grant);
- be a full-time student enrolled for a higher degree, registrar in training or in a non-clinical full-time research position (post-doctoral scientist within 8 years of PhD completion);
- be a first author of an abstract accepted for oral or poster presentation at a primarily nephrology-oriented meeting **OR** be able to demonstrate how attendance at this activity is both directly relevant to nephrology and will specifically benefit both the applicant's research and education, and other members of the Society;
- ensure that their application is received by the Society at least three (3) months before the start of the meeting/course/workshop, or by the closing date of the abstract submission (whichever is lesser); and
- not be in receipt of any other sources of funding to attend the meeting.
- Applicants should demonstrate (a) how this grant will add value to nephrology in Australia and New Zealand, and (b) how they will disseminate this work to the benefit of Society members as a whole.

**Please note that acceptance of any other external funding for the meeting will preclude receipt of this award**

Membership Financial Support Limit

**(A) Special Purpose Travel Grant is limited to one per individual**

**Return form to:** Honorary Executive Officer  
ANZSN  
145 Macquarie Street  
SYDNEY NSW 2000 AUSTRALIA  
[anzsn@nephrology.edu.au](mailto:anzsn@nephrology.edu.au) FAX: +61 2 9241 4083

**ANZSN Office Use Only** Date joined ANZSN:    /    /

ANZSN subscription fees paid to date:    **Yes**     **No**

Previous support verified:    **Yes**     **No**     Abstract Approved: **Yes**     **No**