**AMSIG Travelling Scholar Application Form**

The purpose of AMSIG’s travelling scholar grants is to provide research experience to AMSIG members. Applicants are required to complete an application form for consideration by the AMSIG Research Committee. Project funding will provided, from AU$5,000 - $10,000 per traveling scholar grant. Timelines and topics are not restricted and allocations will be at the discretion of the AMSIG Research Committee.

**Those successful in being awarded funding are asked to present their research in person at an AMSIG Annual Meeting and to submit their work for publication.**

**PLEASE NOTE:**

* All sections of the application form must be completed with the correct information.
* Supplementary documents must be attached to this application.
* Ensure that all relevant signatures are provided.
* Scan your completed document and then email to the AMSIG Secretary at [amsigsecretary@gmail.com](mailto:amsigsecretary@gmail.com)
* The review process may take 1-2 months.
* It is anticipated that successful applicants will be announced following the review process.

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| **Section 1: APPLICANT DETAILS** | | | | | | | | | | | | | | | | | | | | |
| **Section 1a: Applicant Details** | | | | | | | | | | | | | | | | | | | | |
| *Title* |  | | | | | | *Family*  *Name* |  | | | | *First*  *Name* | | |  | | | | | |
| *Position Title* | |  | | | | | | | | | | | | | | | | | | |
| *Institution/*  *Organisation* | | | | |  | | | | *Department/*  *Unit* | |  | | | | | | | | | |
| *Email* |  | | | | | | | | *Phone* |  | | | | | | | | | | |
| *Role of Applicant* | | |  | | | | | | | | | | | | | | | | | |
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| **Section 1b: Additional Applicant Details (only if required)** | | | | | | | | | | | | | | | | | | | | |
| *Title* |  | | | | | | *Family*  *Name* |  | | | | *First*  *Name* | | |  | | | | | |
| *Position Title* | |  | | | | | | | | | | | | | | | | | | |
| *Institution/*  *Organisation* | | | | |  | | | | *Department/*  *Unit* | |  | | | | | | | | | |
| *Email* |  | | | | | | | | *Phone* |  | | | | | | | | | | |
| *Role of Applicant* | | |  | | | | | | | | | | | | | | | | | |
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| **Section 1c: Additional Applicant Details (only if required)** | | | | | | | | | | | | | | | | | | | | |
| *Title* |  | | | | | | *Family*  *Name* |  | | | | *First*  *Name* | | |  | | | | | |
| *Position Title* | |  | | | | | | | | | | | | | | | | | | |
| *Institution/*  *Organisation* | | | | |  | | | | *Department*  */Unit* | |  | | | | | | | | | |
| *Email* |  | | | | | | | | *Phone* |  | | | | | | | | | | |
| *Role of Applicant* | | |  | | | | | | | | | | | | | | | | | |
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| **Section 1d: Mentor/Supervisor Details (required if main applicant is a trainee)** | | | | | | | | | | | | | | | | | | | | |
| *Title* |  | | | | | | *Family*  *Name* |  | | | | *First*  *Name* | | |  | | | | | |
| *Position Title* | |  | | | | | | | | | | | | | | | | | | |
| *Institution/*  *Organisation* | | | | |  | | | | *Department/*  *Unit* | |  | | | | | | | | | |
| *Email* |  | | | | | | | | *Phone* |  | | | | | | | | | | |
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| **Section 2: TRAVELLING GRANT DETAILS** | | | | | | | | | | | | | | | | | | | | |
| **Section 2a: Major Title of Project** | | | | | | | | | | | | | | | | | | | | |
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| **Section 2b: Synopsis (maximum 200 words)** | | | | | | | | | | | | | | | | | | | | |
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| **Section 2c: Hypothesis (maximum 200 words)** | | | | | | | | | | | | | | | | | | | | |
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| **Section 2d: Scientific Aims of Travel (maximum 200 words)** | | | | | | | | | | | | | | | | | | | | |
| *What is it that you hope to learn?*  *What skills do you hope to develop as a result of completing this travel project?* | | | | | | | | | | | | | | | | | | | | |
| **Section 2e: Destination of Conference where you will travel to, and present research** | | | | | | | | | | | | | | | | | | | | |
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| **Section 3: TIMELINE** | | | | | | | | | | | | | | | | | | | | |
| **Section 3a: Travel Dates** | | | | | | | | | | | | | | | | | | | | |
| *Please list the timeline of all aspects of your travel, including start date (month and year), deadlines for goals such as patient accrual and projected completion date (month and year).* | | | | | | | | | | | | | | | | | | | | |
| **Section 3b: References** | | | | | | | | | | | | | | | | | | | | |
| *Please list references related to your travel.* | | | | | | | | | | | | | | | | | | | | |
| **Section 4: BUDGET** | | | | | | | | | | | | | | | | | | |
| **Note: Below you will find a template for your project budget details. We are happy for you to adjust the template to meet your needs. Please also note that it is the applicant’s responsibility to check with their institution as to whether overhead or similar fees will apply to their grant, as no more than 10% of the grant can be used for fees of this nature.** | | | | | | | | | | | | | | | | | | |
| **Section 4a: Budget for the Proposed Research Project** | | | | | | | | | | | | | | | | | | |
| *Item* | | | | | | | | | | | | | | *Unit Price* | | | *# of Units Required* | *Amount* |
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| ***TOTAL*** | | | | | | | | | | | | | | | | | |  |
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| **Section 4b: Budget Justification** | | | | | | | | | | | | | | | | | | |
| *Please provide a justification of the budget and prioritisation of funding on all specific aspects of the budget (ie travel, accommodation, staff, equipment, ethics submission fees, and data analysis costs.* | | | | | | | | | | | | | | | | | | |
| **Section 4c: Other Funding Received or Applied for Related to the Project** | | | | | | | | | | | | | | | | | | |
| *Please provide the details and amounts of any other funding that has been received or applied for in relation to the Project. Please note that the presence of other sources of funding are not considered to be detrimental to the outcome of this application.* | | | | | | | | | | | | | | | | | | |
| **Section 5: SIGNATURES** | | | | | | | | | | | | | | | | | | | | |
| **Section 5a: Signature of Applicant** | | | | | | | | | | | | | | | | | | | | |
| *Applicant Signature* | | | |  | | | | | | | | | *Date* | | |  | | | | |
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| **Section 5b: Signature of Department Head** | | | | | | | | | | | | | | | | | | | | |
| Please note:   * Applications from the Fellow should give guidance in respect of the preparation and presentation of the research plan and budget. * Approval from the Head of Department must be documented below and a Letter of Support confirming approval should be attached to this document. Where relevant, the letter should include the fact that approval is given for the department to support the project by providing funding or in kind support for imaging given that the grant will only cover imaging costs at 50% of the MBS-rate. | | | | | | | | | | | | | | | | | | | | |
| *Signature of Department Head* | | | | | |  | | | | | | | *Date* | | |  | | | | |
| *Printed Name of Department Head* | | | | | |  | | | | | | | | | | | | | | |
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| **Section 6: APPLICATION CHECKLIST** | | | | | | | | | | | | | | | | | | | |
| Before submitting your application, please ensure that you have completed the following:   * **You have read the AMSIG Travelling Scholar Grant Guidelines.** * You have completed **Section 3a**; start date (month and year) and completion date (month and year). * You have completed the Budget section (**Section 4**). * You have signed this application form (**Section 5a**). * The Head of Department has signed this application form (**Section 5b**). * You have attached approval from the Head of Department (**Section 5b**). * You have attached your **current** curriculum vitae (CV). * You have completed the appropriate application form in a legible manner. * You have submitted your application form **before the deadline**.   **Please ensure that you have read the above checklist and ticked each of the items prior to submitting this form to the AMSIG Research Committee. Any applications received by AMSIG which have not completed Section 6 – Checklist will be returned.**  **After submitting your application, please be aware of the following information and requirements:**   * An email will be sent to you confirming that your application has been received. Please ensure your email address is legible on the application form. * The review process may take 1-2 months. * If you are awarded an AMSIG Travelling Scholar Grant, you will be required to provide progress reports to the AMSIG, six-monthly initially and then yearly depending on the term of the grant. A progress report template will be provided. * If you are awarded an AMSIG Travelling Scholar Grant and you change the travel destination without permission from AMSIG, you will be required to return the grant funding to AMSIG.. | | | | | | | | | | | | | | | | | | | |