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|  | **Application for BISOM Travel Bursary** |

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| **Full Name:**  |
|  | **Current Address:** |
| **Date of Birth:**  |  |
|  |  |
| **Email:**  |  |
|  |  |
| **Tel No:** |  |
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| **Venue where meeting will take place:** |
| **Date of Visit:**  |
| **Length of Visit:**  |
| **Are you presenting an oral or poster presentation?** |
| **Title of presentation**  |

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##### Visit details i.e. why are you going, what experience are you hoping to gain:

*(Please do NOT include attachments with your application)*

##### Why are you attending the meeting?

##### What experiences do you hope to achieve?

|  |  |
| --- | --- |
| **Are you a member of BISOM? Yes / NO** *(Please circle)* |  Date joined:  |
| **If you are a consultant, what date were you appointed?** |  Date appointed: |

**If so, please state:**

**Have you applied for any other grants / support: Yes / No**

**Education and Qualifications:**

|  |  |  |
| --- | --- | --- |
| Date | Qualification | Organisation |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Career to date:**

**Current Employment**

**Previous Employment**

##### List of Publication

Save this application form as a Word Document.

Please submit the form electronically to secretary@bisom.org.uk

Signature Date

The information supplied will only be used in connection with your application for a Bursary and will only be shared with members of the Bursary Committee in accordance with GDPR.