

Coloplast SenSura MIO WCET Education Scholarship 2014

In Association with the AASTN

Application Form
Apply by 28th February 2014

MR / MRS / MISS / MS / DR

Surname: _____

First name: _____

Home Address: _____

STATE: _____ POST CODE: _____

EMAIL: _____

(Use correct upper and lower case)

Coloplast E-Learning Module Completed:

YES NO

Certificate of completion endorsed by Coloplast rep:

YES NO

FINANCIAL ASSISTANCE:

Have you applied for financial assistance from any other source?

Yes

NO

Coloplast SenSura MIO WCET Education Scholarship 2014

Did you / will you attend the program on:
Unpaid leave / annual leave / paid study leave/ other?
(Please circle / explain)

ABOUT YOU:

Please describe your work place role.

What has motivated you to apply for the Coloplast SenSura MIO
WCET Educational Scholarship 2014?

How will the knowledge that you gain at the WCET conference be
incorporated into your current practice?

Coloplast SenSura MIO WCET Education Scholarship 2014

Please Note:

- All applicants must be a full member of AASTN
- New Zealand registered Stomal Therapy Nurses are eligible to apply
- For the applicant to be eligible and meeting the REQUIRED CRITERIA.
- The applicant MUST also liaise with Coloplast to determine type of presentation reflecting on their trip to WCET conference in Gothenburg.

Applicant signature: _____

Date: _____

Please include the following with your application:

- Verification from your current employer that you will be released to attend the conference
- Curriculum Vitae

PLEASE RETURN THIS APPLICATION WITH SUPPORTING DOCUMENTATION BY 28th FEBRUARY 2014 TO COLOPLAST:

au.care@coloplast.com

or: Attention Jenelle Guest

c/o Coloplast

PO Box 240 Mt Waverley VIC 3149

*****Scholarship winner will receive 1 return economy airfare and WCET registration only. Accommodation / Transfers / Meals etc are not included.

Coloplast SenSura MIO WCET Education Scholarship 2014

Office Use Only:

Application form:	YES	NO
Curriculum Vitae:	YES	NO
Employment Verification:	YES	NO
Member AASTN / WCET:	YES	NO
Date application received		___ / ___ / ___