**Optometry Victoria South Australia’s**

**postgraduate travel grants 2023**

**Application form**

Please ensure that you read and understand *OV/SA’s* [*postgraduate travel grant 2023 information*,](https://www.optometry.org.au/about-us/awards/awards-vic-sa/postgraduate-travel-grant/) before you complete this form. **Applications must be emailed to** **l.hsieh@optometry.org.au** **no later than 5pm Wednesday 7 June 2023 to be considered.**

1. **Personal details**

|  |  |
| --- | --- |
| **Title** |  |
| **First name** |  |
| **Family name** |  |
| **Street address** |  |
| **Suburb, state and postcode** |  |
| **Telephone** |  |
| **Email** |  |
| **OV/SA member number** (essential) |  |

1. **Academic details**

|  |  |
| --- | --- |
| **Qualifications** |  |
| **Research institution** |  |
| **Research supervisor** |  |
| **Research background** (summarise your research background including any publications and lectures, or attach your CV) |  |

1. **Please indicate whether you have the support of your research institution for this activity.**

YesNo

1. **Grant\***
2. **Please indicate if you have previously received a postgraduate travel grant from OV/SA.**

 Yes No

1. **Please indicate if you are willing to report on your conference experience for OV/SA.**

Yes No

\**You may request reimbursement for travel that has already been paid for, but not undertaken.*

1. **Presentation details**

|  |  |
| --- | --- |
| **Presentation details**: provide a summary or attach your abstract. Comment on how this is relevant to clinical optometry and vision science |  |
| **Type of presentation** | **Lecture Poster Other** |
| **Have you presented this research elsewhere?** If yes, indicate where and when. |  |
| **Have you received funding from other sources to support this activity?** If yes, provide details. |  |