BURSARY APPLICATION FORM

To apply for a Conference Bursary from the Southern African HIV Clinicians Society please complete & return this form to Estie Schoombee by fax +27 (0)11 463 3265 or email estie@soafrica.com

Please note that submission of an application does not guarantee a bursary will be awarded

ONLY MEMBERS OF THE SA HIV CLINICIANS SOCIETY MAY APPLY FOR THESE BURSARIES

BURSARIES AVAILABLE:

1. Full Registration – Registration Fees
2. Discounted Registration – Reduced Registration Fees

First Name:	Title:
Surname:	
Tel:	Mobile:
Email:	
City:	Province/Country:
Institution/Affiliation:	
Profession:	
Designation:	
Are you a member of the SA HIV Clinicians Society? No ☐ Yes ☐	Membership No:

Kindly indicate which bursary you are applying for:	**Mark with an X**
1. Full Registration – Registration fees	
2. Discounted Registration – Reduced registration fees	
Have you submitted an abstract?	

MOTIVATION:

Please attach a motivation of between 100 and 300 words, typed in MS Word (or similar), identifying reasons for your bursary application.

CONTACT DETAILS

Conference Office: Scatterlings Conference and Events
Contact: Estie Schoombee
Tel: +27(0)11 463 0585 Email: estie@soafrica.com