EDC Bursary Application Form

Name:

Email contact:

Institution:

Relevant role, title and unit:

Specify EDC Conference applying:

Statement

Please provide a statement (up to 250 words) indicating why you wish to attend the conference and how your attendance will further your professional development and career planning:

Professional Development Funds:

[] I declare I don't have access to other Professional Development funds (requisite criteria)

Previous bursaries:

[] I have not received a bursary for the EDC Conference in the past

[] I have received a bursary for the EDC Conference in the past, specify year _____

Applicant Signature: _____ (e-signature or sign and scan)

Verification by an EDC member

I verify to the best of my knowledge that the above statements are true.

EDC member Signature:	(e-signature or sign and scan)
Date:	
Name:	Institution:

Contact email: