

# Strengthening Rural and Remote WA

Community Safety and Injury Prevention Conference 2009

Monday 29 to Tuesday 30 June 2009  
Queens Park Theatre, Cathedral Ave,  
Geraldton Western Australia

## Travel Grant Application

### What are the assessment criteria?

Funding is available to assist people from rural and remote areas to attend this two-day event. Allocation of funds will be assessed based on the following criteria:

- Acceptance of an abstract to present at the Conference
- Relevance of your role (paid or voluntary)
- Contribution of support from your organisation (for example, meal or travel allowance)

### Please note:

- There will be two rounds of grants, one for presenters and one for general delegates.
- The full amount of funding requested may not be available.
- Staff time cannot be claimed as an expense.

### Who can apply?

This event is relevant for people involved with community safety and/or injury prevention. This may include staff from: Health Services, Local Government, State Government, non-government, community based and not-for-profit organisations, Police, Schools, and members of the community.

### Important Dates:

#### Presenters:

- **Applications open Wednesday 1st April 2009**
- **Applications (first round) close Wednesday 15th April 2009**
- **Presenters notified Monday 20th April 2009**

#### General Delegates:

- **Applications close Friday 1st May 2009**
- **Applicants notified Friday 8th May 2009**

### How will the funds be sent?

If you are considering applying for travel assistance to attend this free event, we encourage you to contact ICCWA to discuss your application.

Receipts and a reimbursement form (to be provided by ICCWA) must be returned for reimbursement of expenses. If you are unable to pay costs up front, please contact ICCWA to discuss.

Please email, fax or post this application by **Friday 1st May 2009** or **Wednesday 15th April 2009** for presenters to:

**Email:** [iccwaevents@iccwa.org.au](mailto:iccwaevents@iccwa.org.au)  
**Mail:** Injury Control Council of WA  
City West Lotteries House  
2 Delhi Street, West Perth, 6005  
**Telephone:** (08) 9420 7212  
**Facsimile:** (08) 9486 7955



# Travel Grant Application Form

Title (Dr/Mr/Ms/Mrs): \_\_\_\_\_ Name: \_\_\_\_\_

Position: \_\_\_\_\_

Organisation: \_\_\_\_\_

Postal address: \_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Please briefly explain your interest in attending this conference

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Would you be able to attend this event without travel assistance? (Please tick)  Yes  No

Have you submitted an abstract to present at this conference? (Please tick)  Yes  No

What will this funding be used for? (Please list items)

**Please note:**

- **Lunch, morning and afternoon tea will be provided at the event on 29th and 30th June.**
- **No alcohol expenses will be covered.**
- **Receipts for expenses will be required for reimbursement.**

Expenses: (Please list)

\_\_\_\_\_ \$

\_\_\_\_\_ \$

\_\_\_\_\_ \$

\_\_\_\_\_ \$

\_\_\_\_\_ \$

\_\_\_\_\_ \$

**Total requested amount:** \_\_\_\_\_ \$

## Declaration

I confirm that the details contained in this application are true and correct. I understand that if this application is approved, my signature below is an agreement to abide by the undertakings and conditions, as outlined in the guidelines (page 1 of this document).

Signed: \_\_\_\_\_

Position: \_\_\_\_\_

Date: \_\_\_\_\_