



Cancer Education Course for Kimberley Aboriginal Health Professionals

Monday 21 May to Thursday 24 May 2012

The Cancer Council WA is now calling for applications for the 2012 Cancer Education Course for Aboriginal and Torres Strait Islander Health Professionals in the Kimberley, to be held in Broome.

The four-day Cancer Education Course aims to increase the cancer knowledge of participants by providing information about cancer, treatment and the impact of the disease to improve the care of Aboriginal people with cancer.

Registration free

Participants will receive:

- Travel expenses within Kimberley (to and from Broome)
- Meals and accommodation;
- Course registration; and
- a Participant booklet and study notes

**Closing date for all applications:
Monday 23 April 2012**

For further information and an application form, please contact:

Tracey Eades and Emma Croager
Cancer Council Western Australia
15 Bedbrook Place
Shenton Park WA 6008
Phone: (08) 9388 4382 / 9388 4347
Fax: (08) 9388 4399
Email: education@cancerwa.asn.au

Or download an application form from our website – www.cancerwa.asn.au

Acknowledgements

Cancer Council WA gratefully acknowledges its Advisory Team for their support and guidance in the development of this program.



PEPA Program of
Experience in the
Palliative Approach
Funded by the Australian Government Department of Health and Ageing





Application form

Cancer Education Course for Aboriginal Health Professionals

Course date: Monday 21 May to Thursday 24 May 2012

Applications close: 5pm, Monday 23 April 2012

Fax: (08) 9388 4399

Please print

Surname: _____ Given names: _____

Mailing address: _____ Postcode: _____

Telephone: Work _____ Home: _____

Email: _____

Place of employment: _____

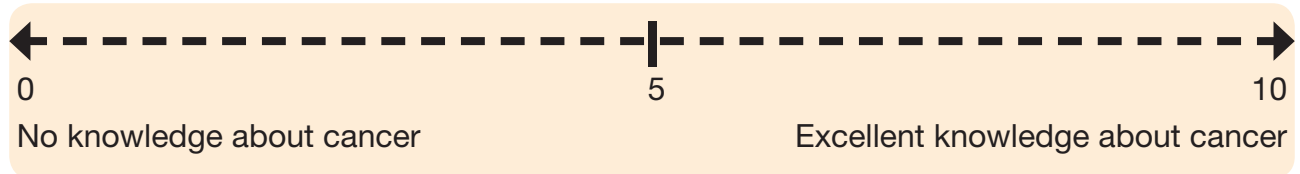
Current job position: _____

Education and Qualifications: _____

What other courses have you attended that relate to cancer?

Tell us about what you do at work on a day to day basis?

On the scale below, please indicate your current knowledge about cancer



Please list here the reasons why you would like to attend this course?

How will you share your knowledge and skills after the course?

How did you find out about this course?

- Email Work colleague Cancer Council website
 Brochure/flier Other _____

Applicants signature _____ Date _____

Employer/Supervisor recommendation:

I/We _____ fully endorse the application of
(employer/supervisor – please print)

_____ for the Cancer Council Western Australia's
(name of applicant)

Cancer Education Course for Aboriginal Health Professionals.

Employer/supervisors signature: _____

Employer/supervisors name: _____

Employer/supervisors position: _____

Date: _____

Please complete and return your application
no later than 5pm on Monday 23 April 2012.

Return your application to:

Tracey Eades, Indigenous Project Officer
Cancer Council WA, 15 Bedbrook Place, Shenton Park, WA 6008.
or fax it to: (08) 9388 4399
or email to: education@cancerwa.asn.au



Government of **Western Australia**
Department of **Health**
WA Cancer and Palliative Care Network