



# The Infection Control Association of WA Inc

## ICAWA ANNUAL EDUCATIONAL SCHOLARSHIP 2011

### Purpose

The Infection Control Association of Western Australia (ICAWA) aims to invest in the future of the profession by assisting its members with continuing education.

By facilitating further study in this area, we can advance the standing of both the profession and the Association.

### Type Scholarship

- a) 1 x Post Graduate (up to \$5, 000)
- b) 1 x Training (up to \$1, 000)

### Eligibility Criteria

1. Must be currently employed in infection prevention and control (full/part time) private or public **within Western Australia**
2. Must be a current ICAWA member for **1 or more years**
3. Course must be related to infection prevention and control practice
4. Must be an Australian citizen or permanent resident
5. Attached application form must be submitted

### Ineligibility

1. Previous recipients of this scholarship
2. ICAWA membership less than 1 year
3. Members not practicing within WA
4. Members not practicing within the specialty of infection prevention and control
5. Corporate members

### Eligible Courses

- An accredited university postgraduate course (full or part time)
- An accredited health services course via TAFE or another registered training organisation (full-time or part time)

*Note: a registered training organisation is an organisation that is registered by the relevant State training authority in accordance with the Australian Recognition Framework to provide one or more vocational education and training programs*

The scholarship is not retrospective and is only available for course undertaken in 2011.

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## Supporting Documentation

1. Must acknowledge any other funding sources eg: employer or other scholarships
2. Applicants must enrol for the certificate/diploma/degree at a fully accredited institution and produce proof of enrolment with the application or submit enrolment form to ICAWA executive after the award of the scholarship
3. Statement explaining relevance to practice
4. Declaration from nominated referee
5. Statement of academic record is to be submitted on completion of course including statement of successful completion of course

## Time Frame

Applications shall be received by **October 31** for courses being undertaken the following year.

Applications will be considered at the **November Executive** meeting.

Applicants will be notified **within 2 weeks** of this meeting.

## Incomplete or Misleading Information

Once the application is submitted it is considered to be final. As the application is the prime source of information for assessment it must contain all the information required. All details must be current at the time of application.

If ICAWA believes that omissions or inclusions of misleading information are intentional, it will refer the matter for appropriate legal action.

Students who defer studies *may* be subject to forfeiture of their scholarship

## Financial requirements

Scholarships operate on a calendar year and are paid quarterly in advance.

Any claims for reimbursement will be paid as they fall due after receipt of appropriate documentation.

In preference the agreed funding will be paid directly to the educational institution

Withdrawal/failure/noncompletion of course - A review by the executive will be undertaken to determine if the monies to be repaid to ICAWA.

If course takes longer than stated in application form, applicant must explain in writing reason for extension of the course for scholarship to remain valid.

Scholarship recipients are required to make their own enquiries with the Australian Taxations Office (ATO) regarding the status of the scholarship for income tax purposes.

## Objections

Applicants may contact ICAWA seeking clarification on the outcome of their application for funding. ICAWA will provide a written response.

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## APPLICATION FORM

<b>Date of Application</b>	
<b>Name</b>	
<b>Applicant Contact Details</b>	<b>Address:</b>  <b>Phone:</b> <b>Fax:</b> <b>E-mail</b>
<b>Work Place</b>	
<b>Job Description</b>	
<b>ICAWA Membership Number</b>	
<b>Yrs of membership</b>	
<b>Institution Name &amp; Address</b>	
<b>Institution ABN</b>	
<b>Course Title</b>	
<b>Name of Contact at Institution</b>	<b>Phone:</b> <b>E-mail:</b>
<b>Type of Study</b>	<input type="checkbox"/> <b>Postgraduate</b> <input type="checkbox"/> <b>TAFE</b> <input type="checkbox"/> <b>Other .....</b>
	<input type="checkbox"/> <b>Full-time</b> <input type="checkbox"/> <b>Part-time</b>
<b>Expected date of completion of course</b>	

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<b>Have you applied for funding from any other source?</b>	<input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>Yes</b> <i>(describe)</i> ..... ..... ..... .....
<b>In 100 – 200 words, write a statement of how this course will be relevant to your current infection control practice. PLEASE ATTACH STATEMENT</b>	

## DECLARATION

1. I declare that the information supplied on this form is complete, true and correct.
2. I declare that should my circumstances change ie financial, enrolment, health, family etc I will inform ICAWA immediately.
3. I declare that all questions are answered truthfully and completely and if questions are found to be incomplete or misleading then my application will not be considered or funding will be withdrawn or I will be required to pay back all scholarship monies to ICAWA

Signature:

Date:

## REFEREE DECLARATION

I declare that the information supplied by ..... is complete, true and correct.

Name

Position

Signature

Date

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## Final Checklist for Submission of Application

- Answered every question on the application form
- Proof of Enrolment
- Tax invoice for course
- Statement explaining relevance to practice
- Signed Declaration forms