



THE BRITISH PAIN SOCIETY

IASP 16th WORLD CONGRESS ON PAIN TRAVEL BURSARY

GUIDELINES

DEADLINE: 27th JULY 2016

In order to encourage members to attend the International Association for the Study of Pain World Congresses, the British Pain Society has made funds available to assist its members who require financial assistance to attend the 16th World Congress on Pain, on 26-30 September 2016 in Yokohama.

Eligibility

- The applicant must be a current, Ordinary member of the British Pain Society, in good standing, and a member of IASP.
- The applicant must have an income of less than £40,000 p.a. and give evidence of such
- The applicant must be working within the field of pain
- The applicant may not apply for this bursary if he/she has been granted other Pain Society bursaries within 12 months of this application
- The applicant must be presenting work at the Congress

Application

- Applications must be submitted on the Application Form attached
- The Application Form must be counter-signed by the Head of Department or supervisor.
- The applicant must provide a copy of the abstract they intend to present and confirmation of receipt of abstract
- The applicant must submit a CV (including full list of publications)

Decision

- Applications will be evaluated by a British Pain Society sub-committee
- The applicant will be notified of the decision in writing
- If successful, the applicant must provide all receipts against which the aid is to be provided. Aid is limited to the cost of registration, accommodation and economy travel. A cheque will then be sent to the applicant.



IASP 16th WORLD CONGRESS ON PAIN TRAVEL BURSARY APPLICATION FORM

British Pain Society Membership No:

Title.....First names.....

Surname

Degrees/Qualifications:

Contact Address:

.....

Tel: Fax:

Email:

Institution name/place of work (if different from above)

.....

Current post:.....

Current income:

Aid requested

Registration fee:

Accommodation (max. 5 nights stay) cost per night £ No. of nights

Economy travel:

Other sources of support available. Please indicate if obtained (O) or applied for (A)

1. £:

2. £:

Total amount of aid requested from the British Pain Society:£.....

Signed Date

(Head of Department/supervisor)

Signed: Date:

(Applicant)