

PATRICK WALL INTERNATIONAL MEETINGS BURSARY GUIDELINES

Professor Patrick Wall had an international reputation for research work on pain, especially the application of basic research towards clinical benefit. In particular, he was keen to promote the work of young researchers. The Society has made funds available to assist scientists, clinical or allied health practitioners at the early stages of their career in pain research who require financial assistance to present their work at overseas scientific meetings, other than the British Pain Society's Annual Scientific Meeting and the IASP World Congress (separate bursaries are available for these two meetings).

Eligibility

- The applicant must be within ten years of their last degree.
- The applicant must have an income of less than £40,000 p.a. and give evidence of such.
- The applicant must be carrying out scientific or clinical research within the field of pain.
- The applicant may not apply for this bursary if he/she has been granted other British Pain Society bursaries within 12 months of this application.
- The applicant must be a major contributor to the research that is being presented in oral or poster form at the meeting.
- The applicant should either be a current Ordinary Member of the British Pain Society or be applying for such membership (award of the Bursary is dependent upon BPS membership being formally approved)

Application

- Applications must be submitted on the attached Application Form, accompanied by your email receipt of online application of membership of the British Pain Society (if applicable).
- The Application Form must be counter-signed by the Head of Department or Sponsor.
- The applicant must provide a copy of the abstract they intend to present and confirmation of acceptance.
- The applicant must submit a CV (including full list of publications).
- Deadline

Applications will be considered twice yearly, for which applications must be submitted by:

- 31st May
- 30th November

Decision

- Applications will be evaluated by the Science & Research Committee of the British Pain Society.
- The applicant will be notified of the decision in writing within two weeks of the deadline.
- Each year a certain amount is set aside in the budget to provide Pat Wall bursaries. The
 size of each bursary is therefore dependent on the number of applications received and
 may not cover the full amount requested. Financial contributions are available
 towards part, or all, of the following costs only; registration fees, accommodation, economy
 class travel.
- Payment will be made to the applicant by way of reimbursement following the meeting.

Third Floor, Churchill House | 35 Red Lion Square | London WC1R 4SG
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PATRICK WALL INTERNATIONAL MEETINGS BURSARY APPLICATION FORM

Any Ordinary British Pain Society Member requesting a bursary to present research at scientific meetings, other than the British Pain Society ASM or the IASP World Congress, should complete and return this form. * If necessary, the form should be accompanied by an application form for membership of the Society.

Section A: Personal Details

| British Pain Society Membership No (if applicable)*: |
|---|
| Title: First names: |
| Surname: |
| Degrees/Qualifications and date of last degree: |
| Contact Address: |
| |
| |
| Tel: |
| Email: |
| Institution name/place of work (if different from above): |
| |
| Current post: |
| Current income: |

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| Section B: Details of Scientific Meeting | | |
|---|-----------|--|
| Name and location of Meeting to be attended: | | |
| | | |
| Date of Meeting to be attended: | | |
| Title of proposed research that is to be presented: | | |
| | | |
| | | |
| | | |
| Amount of aid requested: | | |
| Registration: | | |
| - | | |
| · | | |
| | | |
| Other sources of support obtained or applied for: 1 | £: | |
| 2. 3. | | |
| 4 | £: | |
| Last successful financial support for attendance at a scientific meeting of any type: | | |
| Source of support: | | |
| Date: | Amount: £ | |
| Last successful financial support received from the Society: | | |
| Date: | Amount: £ | |
| I confirm that I support attendance at this conference: | | |
| Signed: | Date: | |
| Head of Department/supervisor | | |
| Signed:Applicant | Date: | |

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