**DECLARATION FORM - ANZSN SHAUN SUMMERS CLINICAL TRAINEE AWARD APPLICANTS**

In applying for the Shaun Summers Clinical Trainee Award I confirm that I:

* am a current financial member of the ANZSN
* am a fulltime Nephrology Advanced Trainee or Clinical Trainee
* not enrolled in any higher research degree
* am the first author on the abstract and completed the research whilst working in a full time training (not research) position
* my research meets the Award criteria (clinical research including, but not limited to, clinical audits, cohort and case studies, guideline implementation projects and morbidity mortality reviews)
* have submitted only one abstract for consideration in the Clinical Trainee Award category
* understand that if my abstract wins the Young Investigator Award or any other Award, I will not be considered eligible for the Clinical Trainee Award
* if selected, I will attend and present the abstract at the Annual Scientific Meeting

**Applicant Name:**

**Applicant Signature:**

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Please list your abstract title and the name of your research supervisor below.

**Abstract Title:**

I certify that the applicant was in a full time Advanced Trainee or Clinical Trainee role when the research was completed. I have read the guidelines and confirm that she/he is eligible to apply for the Award.

**Research Supervisor Name (please print):**

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**Institution:**

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**Signed:**

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

Please email the completed declaration to [mail@conferencedesign.com.au](mailto:mail@conferencedesign.com.au) at the same time you submit your abstract. If you have qeustions, please contact Conference Design at +61 3 6231 2999.