**DECLARATION FORM - ANZSN YOUNG INVESTIGATOR AWARD (YIA) APPLICANTS**

I am applying for a YIA in the following category (**tick one box only**):

* Clinical Science
* Basic Science

In applying for the YIA I confirm that I am:

* a current financial member of the ANZSN
* within three years of attaining my Fellowship or PhD
* the presenting author and am listed first on the abstract
* the primary driver of the research presented
* I have submitted only one abstract for consideration in the YIA category
* if selected, I will attend and present the abstract at the Annual Scientific Meeting

**Applicant Name:**

**Applicant Signature:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Abstract Title:**

I certify that the applicant is at early stage of his/her career. She/he is the first author and is the primary driver of the research presented. I have read the guidelines and confirm that she/he is eligible to apply for the Award.

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Institution:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signed:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Please email the completed declaration to 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.