



WCSM Education Trust: 2020 Ophthalmologist Travel Award Scheme

Guidance Notes and Application Form

1. All applications must be submitted electronically in Word or PDF format and sent to clerk@spectaclemakers.com by email to arrive **by 5pm on Wednesday 19 February 2020**.
2. Failure to complete the application form fully and in a clear, readable format could invalidate your application. **Handwritten applications will not be accepted.** Your application should be written in plain English and be free from spelling and grammatical errors.

Section A – Eligibility and Personal Details

- A.1. Eligibility is restricted to ophthalmologists presenting research at a conference while in specialist training years 1-7, during Out of Programme Research (OOPR) or while carrying out a Fellowship post ST7.
- A.2. WCSM Education Trust will process the details in your application form in accordance with the Data Protection Act 2018. By signing the application form, you agree to your data being stored and shared with WCSM Education Trust trustees and with representatives of The Worshipful Company of Spectacle Makers for the purposes of assessing, awarding and monitoring the WCSM Education Trust Travel Award Scheme.
- A.3. By signing the application form you also agree to the WCSM Education Trust contacting you or your supervisor as declared on the form to check the validity of the information provided in your application.
- A.4. The WCSM Education Trust may wish to use your name and other personal data to publicise these awards. **Please make sure you mark the relevant boxes on the application form to confirm your consent and communications preferences.** Consent is not a prerequisite for the grant of a travel award.

Section B – Conference Details

- B.1. To be eligible for an award, the person travelling must be the presenting author. Only one application may be made in respect of co-authored research. You must provide confirmation of acceptance of your poster/paper with the application.
- B.2. All other details should be the same as those submitted to the conference and accepted.

Section C – Costs

- C.1. Applicants are expected to demonstrate that they have sought funding from elsewhere to cover the conference costs.
- C.2. Applicants are expected to demonstrate that they have made cost effective decisions when booking travel and accommodation.
- C.3. Membership fees, required for some conferences in addition to the conference fee, cannot be claimed. No claims may be made for subsistence during the conference.
- C.4. Itemised costings are required for travel and accommodation. Those details will form the basis for any award. Awards may be made in any amount, up to a maximum of £1,000, at the sole discretion of the Trustees.
- C.5. Confirmation of costs (receipts or booking confirmations showing the cost of accommodation etc yet to be paid for) must be attached to the application.

By signing the application form, you agree, if an award is made, to acknowledge the WCSM Education Trust and use its crest on your poster/paper. Further details will be provided with the award letter.

You also agree to provide a 250-word reflective report on what you gained from attendance and presentation at the conference. This report will be due within 3 weeks of the conference date. If you do not attend the conference without due notice, or do not provide the required report, the Trustees may take action to recover from you the amount of any travel award already paid to you.

WCSM EDUCATION TRUST 2019/20

OPHTHALMOLOGIST TRAVEL AWARD APPLICATION

Section A - Personal Details

Title, First Name, Surname	
Address (stating whether home or work address)	
Contact telephone number (ideally mobile)	
E-mail address(es)	
Stage of training (ST1-7, OOPR or post ST7 fellowship)	
Institution	
How did you hear about this scheme?	
Name of Head of Department/Research Supervisor	
Direct telephone number and email address of Head of Department/Research Supervisor (<i>for the purposes of verification</i>)	
Declaration by Head of Department/Research Supervisor	<p><i>I confirm that the applicant is carrying out research within this department or under my supervision and is at the training stage declared above.</i></p> <p>..... (Signature – scanned or electronic)</p>

Section B – Details of Conference

Name and dates of conference	
Title of accepted poster/paper (<i>please attach evidence of acceptance/ invitation to present</i>)	
Authors of accepted poster/paper	
<u>Abstract</u> (<i>please paste in the abstract that has been accepted for presentation</i>)	

Please describe your plans for continuation of the research following the conference (*max 200 words*):

Section C – Costs

Is your research linked to a funded project?	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes please provide the name of the project, the funder and the amount the project funding is contributing to your conference costs:
Have you received other funds towards the costs of attending this conference, for example, charitable funds?	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes please provide the name of the funder and the amount contributed:
Please explain how you have attempted to acquire funds from other sources to support your conference attendance (<i>maximum 100 words</i>)	

Conference registration fee (attach receipt)	
Travel costs (itemise and attach receipts/booking confirmations)	
Accommodation costs (giving dates) (attach receipts/booking confirmations)	
Bank details (to be used only for payment of an award, if successful)	Name of account holder: Bank name: Sort code: Account number:
Total Amount applied for (The Trustees may award any amount up to a maximum of £1,000, at their discretion)	

Consent for use of personal data and communications preferences

- I confirm consent for my personal data to be used and held by the WCSM Education Trust and/or The Worshipful Company of Spectacle Makers for the purposes of this award programme
- If an award is made to me, I will ensure that the support of the WCSM Education Trust is acknowledged in my paper/poster and I will provide a report of the conference attended within the required timescales
- I consent to the use of limited personal data (name, department, title of paper/research subject, and photograph(s) supplied by me) for publicity purposes, as follows:
- Press releases to professional bodies and the optical press
 - Articles in The Worshipful Company of Spectacle Makers' journal – "From the Master and Wardens" made available to members of the Company and online at www.spectaclemakers.com
 - Social media posts (Facebook, Twitter) by The Worshipful Company of Spectacle Makers and/or The WCSM Education Trust
- I am happy for the Worshipful Company of Spectacle Makers and the WCSM Education Trust to contact me in the future about events and activities that could be of interest to me, by
- Telephone
 - Email
 - SMS
 - Post
- I would like to receive information about membership of the Worshipful Company of Spectacle Makers

I confirm that the information on this form is true and complete.

Signature:

Full name (BLOCK CAPITALS):

Date: