

Aim

To support the continuing education of medical and allied health professionals in the prevention, treatment and palliation of asbestos-related disease.

Conditions

The fellowship may be awarded throughout the year to numerous applicants providing the total amount awarded does not exceed \$30,000 in any one financial year.

Applications shall be reviewed upon receipt and fellowships awarded throughout the year.

A written report is required from each recipient within 3 months of receiving the award summarising the educational benefit of the award to be published, in the absolute discretion of the Fund, in the periodic Newsletter of the Fund.

Eligibility

Applicants must be:

1. A citizen or permanent resident of Australia
2. A medical or allied health professional working in the area of prevention, treatment or palliation of asbestos-related disease.

Application

Applicants must provide:

1. A completed application form
2. A curriculum vitae
3. A referee's report commenting on the value of the program or activity.

A committee made up of Robert Vojakovic (or his nominee), representatives of the Fund and a medical health professional shall assess the applicants.

In the event that the Selection Committee determines (in its absolute discretion) that there are no suitable applicants the fellowship may not be awarded.

For more information

Please contact Kerri O'Toole on (03) 9602 6871 or email kotoole@slatergordon.com.au if you have any questions about the Vojakovic Fellowship.

www.asbestosresearchfund.com.au

Contacting

Slater & Gordon



Asbestos Research Fund

Vojakovic Fellowship

The Slater & Gordon
Asbestos Research Fund

Slater & Gordon



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Application Form

Please complete all sections of this form.

Send your application form and your curriculum vitae to:

Kerri O'Toole
Slater & Gordon Asbestos Research Fund
GPO Box 4864VV
Melbourne VIC 3001

Applicant's name _____

Current position _____

Address _____

Telephone _____

Facsimile _____

Email address _____

Signature _____

Date _____

Details of education program or activity

(If the education program is a conference please attach conference program)

Estimated cost of program/activity

Please set out the benefits you will obtain from participating in this program/activity

(Please refer to the relationship between the aims of the Fellowship and the educational benefit of the program/activity)

