## Barbara Lester Scholarship Fund Application Review Criteria Form

Applicants Name:		Conference Name:			
Type of Presentation:	☐ Oral Presentation	☐ Poster Presentation	□ Se	ssion Fc	acilitation
Criteria			Criteria Met		
				Yes	No
Application form fully completed (includes abstract/confirmation letter/program)					
Curriculum Vitae attached(demonstrates commitment to Neuroscience)					
Copy of annual Nursing	Registration				
Full financial member for minimum 24 months continuously					
Conference held within the last 12 months					
Works within the neuroscience environment					
Presentation/facilitation session relevant to neuroscience specialty					
Previous financial support provided from ANNA					
Request for financial support made to another funding body					
Is a written paper being produced					
If yes, has request for publication been made to a journal other than AJON					
Date application received Review outcome:   Graduation	anted 🔲 Not G	Date application revie Granted	wed:		
Signed:					_
President	Vi	ice-President	Secretary		
Post Scholarship Require  Written report (within  Written paper submit		ś weeks)			

Scholarship Criteria Form October 2006