



FHMRI
FLINDERS HEALTH & MEDICAL
RESEARCH INSTITUTE

Flinders Health and Medical Research Institute Visiting Speaker Program

Applicant Information

Title:

Name:

Current Position:

FHMRI Theme:

Visitor Information

Title:

Name:

Current Position:

Institution:

Contact email:

Dates of proposed visit (dates at Flinders):

Travelling from (location):

If from overseas, reason for visit to Australia:

Brief overview of research interests (attach a copy of visitor's CV):

Indicative program for proposed visit (include seminar date and details):

Please outline the relevance to, and benefits of the proposed visit to FHMRI researchers and HDR students (300 words max):

Proposed Budget

Domestic flights	\$
Accommodation	\$
Catering	\$
Other (please describe)	\$
Total	\$

Application Checklist

Visitor CV attached YES NO

Program attached YES NO

YES I have read and understood the guidelines and conditions of funding

YES I will ensure a notice for the seminar is prepared for the CMPH weekly e-newsletter

Signature

Signed applications and supporting documentation should be submitted by email to cmph.research@flinders.edu.au