BCS 2022 Application Form:

For: Travel & Accommodation grants for Allied Healthcare Professionals (AHP’s)

Please complete the form and return to [finance@bcs.com](mailto:finance@bcs.com)

Please note: if successful in your application you are responsible for registering and attending the Annual Conference 2022

1. Name: ……………………………………………………………

2. Hospital: …………………………………………………………

3. AHP role *e.g. nursing, imaging, physiologist, scientist etc.*

…………………………………………………………………….

4. Brief statement of how attendance at BCS 2022 will facilitate your clinical practice, training and/or career progression.

(Maximum 200 words) …………