

Australian Association for Infant Mental Health West Australian Branch Inc.



Affiliated with
WORLD ASSOCIATION FOR
INFANT MENTAL HEALTH

PO Box 1886
Subiaco WA 6904
ABN 41637885917

Infant Mental Health Scholarship Scheme 2011-2012

In May 2011, the Australian Association for Infant Mental Health West Australian Branch Incorporated (AAIMHI WA) was allocated funds by the Mental Health Commission to administer a scholarship scheme in relation to infant mental health. This funding will provide financial assistance to clinicians working in Western Australia to complete postgraduate level university studies and/or training courses and workshops in infant mental health approved by AAIMHI WA.

Funding is available for individual applicants working in Western Australia to cover their course fees. The funding period is from July 1, 2011 until June 30, 2012, for courses to be completed by December 31, 2012. In addition, non-government agencies will be invited to apply for funding to backfill a clinician's position in order to facilitate the agency releasing the clinician to participate in the training.

Applications will be prioritised for clinicians working in non-government organisations, rural and remote locations and clinicians working directly with infants and their families focusing on infant mental health. However, clinicians and service providers working in other related environments are also encouraged to apply. AAIMHI WA will consider applications in August and October 2011 and in February and May 2012.

The following forms will need to be completed in order to apply for these funds.

1. Application for course fees
2. Application for backfill funds to attend courses (non-governments employees only)

A selection panel will determine the successful applicants based on the information provided in the application forms, so please provide as much detail as possible. All decisions are final and appeals will not be considered.

Closing date

The next round of funding applications are welcome up to **5pm, 24th February 2012**. Successful applicants will be notified by 13th March 2012.

How to Apply

Interested applicants can download the Infant Mental Health Scholarship Application forms on www.aaimhi.org from the AAIMHI website or email aaimhiwascholarships@gmail.com to have an application form emailed or faxed to you.

Completed forms (signed by manager where appropriate) can be scanned and emailed to aaimhiwascholarships@gmail.com

For further information about the scholarships, please contact Cherie by email aaimhiwascholarships@gmail.com

Kind regards,

Elizabeth Seah
Chair
Australian Association for Infant Mental Health West Australian Branch Incorporated
21st November, 2011

Infant Mental Health Scholarship Application for Course Fees

PERSONAL DETAILS

Name: _____

Address: _____

Best contact number: _____

Email address: _____

EMPLOYMENT INFORMATION

Employer: _____

Job Title: _____

Address: _____

Phone: _____ **FTE:** _____

Status (permanent or contract): _____

Government or non-government: _____

PREREQUISITES

	Yes	No	N/A
1. Are you an Australian citizen or permanent resident? If No, please supply additional information below.			
2. Will the course be completed before 31 December 2012?			
3. Has your manager approved your attendance?			
4. If you have been a successful recipient of these scholarship funds before, did you complete the course?			

If 'No' to Question 1, please supply additional information including the length and expiry date of your visa and if you intend to remain in the infant and mental health field within WA.

If 'No' to Question 4 please outline the reasons why you did not complete the course:

COURSE INFORMATION

If applying for more than one course, please list in order of preference

Course Name	Organiser	Start Date	Duration	Location	Cost

PRIORITY WEIGHTING QUESTIONS

Please tick if the following applies to you

	Tick	Weight
I work in a non-government organisation on a full time or part time basis	<input type="checkbox"/>	2
I work outside the metropolitan area on a full time or part time basis – please give the geographic location of your work below:	<input type="checkbox"/>	2
My work requires me to work with infants and their families on a regular basis	<input type="checkbox"/>	2
In my work, I focus on Infant Mental Health	<input type="checkbox"/>	2
I have been a successful recipient of these scholarship funds before	<input type="checkbox"/>	-1
TOTAL		<input type="text" value="/ 8"/>

MANAGER SUPPORT

Manager to sign if they give approval for the applicant to attend the course(s) requested

Name: _____

Signature: _____ Date: _____

Please tick the box if management approval is contingent upon backfill funding (please complete Application for Backfill Funding)

Infant Mental Health Scholarship Application for Backfill Funding

(Please complete one form per course and attach to completed Application Form)
For non-government employees only

PERSONAL DETAILS

Name: _____

EMPLOYMENT INFORMATION

Employer: _____

Job Title: _____

COURSE INFORMATION

Course Name:	
Start Date:	

BACKFILL REQUIREMENT

Please note the total hours of backfill requested cannot exceed half a day per week per semester

A. Total course contact hours:	
B. Total course contact hours during work time:	
C. Estimated travel time to attend course during work time (Hours):	
D. Total number of backfill hours requested (B + C):	
E. Backfill hourly rate (excluding on costs):	
F. Total backfill funds requested (D x E)	

Please attach a copy of a payslip received within the last month as evidence of the required backfill hourly rate.