

The Sir Geoffrey Bateman Travel Scholarship Application

Surname: _____

Title: _____

Forename: _____

Maiden Name: _____

Address: _____

Postcode: _____

Telephone No: **daytime:** _____
 evening: _____

Date of Nightingale Fellowship Membership: _____

NMC PIN: _____

Expiry date: _____

**Nursing Qualifications
and dates obtained** _____

Present post: _____

Grade: _____

Salary: _____

Details of Application

Place(s) to be visited: _____

Dates of travel: _____

Method of Transport: _____

Cost of Travel: _____

Study Leave approval (Yes or No): _____

Study Leave funding (Yes or No): _____

Please detail below the purpose of the visit:

What are your objectives in undertaking this period of study?

What benefits do you anticipate for your work?

What benefits do you anticipate for yourself?

How, and to whom, will you disseminate the benefits of this period of study?

Please provide any additional information that you feel will be helpful to the Committee when considering this application:

I confirm I will submit a report on completion of travel for consideration by the Editor for publication in the Nightingale Fellowship Journal.

Signature: _____

Date: _____

Please return completed form to:

**Nightingale Fellowship Office
6 Trull Farm Buildings
Tetbury Glos GL8 8SQ**