

Summary information:

1. All of the points must be addressed on the following 7 page Application Form. If a particular point is not considered relevant, the Applicant must note that it is 'Not Applicable'.
2. The points must be addressed utilising the space provided.
3. There is no required format as to how each point is addressed.
4. A curriculum vitae must be attached to the Application Form. This curriculum vitae can be attached in the same PDF document as the Application Form or may accompany the Application Form as an additional PDF document. The curriculum vitae must be transmitted concurrently with the Application Form.
5. The Application Form and required Attachment must be forwarded electronically to the IPPP Secretary (secretary@psychologists.org.au) by the stated close date. The Application Form and required Attachment must be forwarded as a PDF document.
6. Please note that as part of the Application Process the Executive Committee reserves the right to request further information and/or to meet with any or all Applicants or require a presentation from any or all Applicants.

Please address each of the following points:

1. Details of the Applicant
 - a. Name of individual
 - b. IPPP Membership type
 - c. Registered business name and trading name if a business
 - d. ABN if applicable
 - e. Type of practice – individual or company, or employed in a private practice
 - f. Contact details – telephone, email, postal address, facsimile.
 - g. Insurances – indemnity (minimum of \$10,000,000), public and product liability (minimum of \$10,000,000), workers compensation, if applicable.
2. Brief statement of the use to which the Ardelis Award will be directed should the Applicant be successful. Ensure that this statement includes a summary of the relevance of this use to the individual's practise of psychology.
3. If applicable, summary of the specific relevance and/or benefit/s that will accrue to the broader psychology profession or consumers of psychology services.
4. Other relevant information the Applicant wishes to include.

1. Details of the Applicant

a. Name of individual

b. Type of IPPP membership (please tick one)

Full-time Practice Member

Part-time Practice Member

Associate Member

c. Registered business name and trading name if a business

d. ABN if applicable

e. Type of practice – individual or company (for Full-time or Part-time practice member), or state details of private psychological practice in which you are employed (for Associate member).

f. Contact details – telephone, email, postal address, facsimile.

Office telephone:

Mobile:

Email:

Facsimile:

Office address:

IPPP Ardelis Award

Application Form



- g. Insurances – indemnity (minimum of \$10,000,000), public and product liability (minimum of \$10,000,000), workers compensation, if applicable to use to which Ardelis Award will be out. Provide amounts of insurance, insurer name/s, policy numbers and expiry dates as applicable.

Insured Name and Policy Number	Insurer	Expiry Date	Limit of Liability

2. Brief statement of the use to which the Ardelis Award will be directed should you be successful your Application. Include a summary of relevance to your practise of psychology.

3. If applicable, summary of the specific relevance and/or benefit/s that will accrue to the broader psychology profession or consumers of psychology services.

IPPP Ardelis Award

Application Form



4. Any other relevant information.

Attachment: Curriculum Vitae

I have attached a curriculum vitae (tick relevant box)

Yes No

Consent to use of name, likeness, image and/or voice to be used for the purpose of promoting, publicising or marketing the Ardelis Award

In the event of being successful in my application to be granted an Ardelis Award,

I, _____,

(Full Name)

consent, to the IPPP using my name, likeness, image and/or voice (including photograph, film and/or video clip or recording of the same) in any media, for an unlimited period of time, without further notification, remuneration or compensation for the purpose of promoting, publicising or marketing the Award (including any outcome).

(Signature)

(Date)

Agreement to participate in all reasonable promoted activities
in relation to the Ardelis Award

In the event of being successful in my application to be granted an Ardelis Award,

I, _____,

(Full Name)

agree, to participate in all reasonable promoted activities in relation to the Award as requested. This includes, but is not limited to providing a brief written statement acknowledging the assistance of the IPPP and explaining the use to which I have put the Award, at the time of invoicing the IPPP for the grant.

(Signature)

(Date)