**Bursary Application for Regional Perioperative Care Events**

Please complete the below form with details of your event and the support you are requesting. Please note that to be eligible for support your event must be multidisciplinary in nature and align with the aims of the Centre for Perioperative Care.

Send your completed form to [cpoc@rcoa.ac.uk](mailto:cpoc@rcoa.ac.uk)

**Event Information**

|  |  |
| --- | --- |
| **Event Title** |  |
| **Summary of the event**  (100 words max) |  |
| **Learning Outcomes** |  |
| **Date and times** |  |
| **Will you be charging a fee for the event?** |  |
| **Venue Name and Location** |  |
| **Lead Organiser** |  |
| **Perioperative Local Lead(s)** |  |
| **Nominated Contact Name** |  |
| **Email** |  |
| **Telephone Number** |  |
| **Commercial Sponsors / Partners** |  |
| **Target Audience**  Please specify both the intended demographic (e.g. trainees, consultants, nurses, surgeons, etc.) and number. |  |
| **Please confirm you will provide an evaluation of the event to CPOC** |  |
| **Any other Information** |  |

**Support Request**

|  |  |
| --- | --- |
| **Financial support\* (please specify estimated costs):** |  |
| **Venue** |  |
| **Catering** |  |
| **Prizes** |  |
| **Other** |  |
|  |  |
| **Non-financial support** |  |

\*Bursaries are available up to a maximum of £1,000.