



# Application/Nomination form for transfer to Fellowship

*Please use block letters when completing this form.*

Name:

Address:

Telephone:

Membership Number:

***Please complete this declaration if you are making an application, on your own behalf, for transfer to Fellowship.***

I hereby apply for transfer to Fellow membership category of Speech Pathology Australia and certify that the enclosed information is true and correct to the best of my knowledge. I have been an Ordinary Member of the Association for \_\_\_\_\_ years and have been engaged in work relevant to Speech Pathology for \_\_\_\_\_ years.

Name:

Date: \_\_\_\_\_ Membership number: \_\_\_\_\_

***Please complete this declaration if you are nominating another Member for transfer to Fellowship.***

We hereby nominate \_\_\_\_\_ *(nominee's full name)*

for transfer to Fellow membership category of Speech Pathology Australia and certify that the enclosed information is true and correct to the best of our knowledge.

*Nominators full name:*

Signed:

Date: \_\_\_\_\_ Membership number: \_\_\_\_\_

*Seconders full name:*

Signed:

Date: \_\_\_\_\_ Membership number: \_\_\_\_\_

*Note: Only one of the nominator and seconder may act as one of the referees in support of the application.*

OPTIONAL: I hereby agree to the nomination for transfer to Fellowship.

Signed:

Date: \_\_\_\_\_ Membership number: \_\_\_\_\_

*The following information should be submitted with the application/nomination:*

- **Current Curriculum Vitae – please include where applicable:**
  - Full record of employment
  - Type of work/responsibilities
  - Names and addresses of all employers
  - Qualifications and awards
  - Memberships and affiliations
  - Professional activities
  - Publications list
  - Research information
  - Community or voluntary service
  
- **Statement in support of application:** A personal statement of not less than 2,000 words in support of the application for Fellowship should be attached. The statement must clearly demonstrate achievement against the selection criteria outlined below and described in detail in Appendix 2:

In order to be recommended for transfer to Fellow, the person must be judged as demonstrating the following four qualities:

1. Excellent achievement
2. Positive innovation and change
3. Leadership
4. Sustained and outstanding contribution

The applicant must show these four qualities in: at least one, but ideally several, of the following areas:

- Contribution to Speech Pathology Australia Professional Association Activities

**PLUS** at least **two** of the following areas:

- Research and Scholarship
- Clinical Practice
- Teaching and Learning
- Management, service delivery and policy development

Additional personal qualities, such as good standing as a member

- **Reference from the Principal referee**

Principal referee Name:

Address:

Phone:

Email:

- **Names and addresses of 2 referees who have agreed to support the application/nomination.**

Referee 2 Name:

Address:

Phone:

Email:

Referee 3 Name:

Address:

Phone:

Email:

**REMINDER: Please include with this application form:**

- Certified copies of academic records if not already held by National Office
- Curriculum Vitae
- Personal statement (from applicant or nominator(s) ) in support of application (using the following template)
- List of 3 referees
- Copies of 3 recent publications, if applicable

## **Statement in support of application**

(not less than 2000 words):

### **Introduction**

(Brief background of eligibility for transfer to Fellowship, highlighting the nominee's areas of strength (at least 2 of the described areas in addition to contribution to the Association))

### **1. Contribution to Speech Pathology Australia Association Activities**

(Describe the nominee's contributions, relating where possible to the four qualities: excellent achievement; positive innovation and change; leadership; sustained and outstanding contribution)

### **2. Research and Scholarship**

(Describe, where applicable, with reference to the four qualities)



**Summary**

**For official use:**

Contribution to Speech Pathology Australia Activities  
(mandatory)

AT LEAST 2 OF THE FOLLOWING:

Research and Scholarship

Clinical Practice

Teaching and Learning

Management, Service Delivery, and Policy Development

MAJOR AREA

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Date Checked:

By:

Title: