**ACIPC Fellowship Application Form**

**Fellowship applicant details**

*Please complete the following details:*

|  |  |
| --- | --- |
| Member Name: |  |
| Member Number: |  |

**Referee details**

Please complete the following details of the two ACIPC members who have agreed to provide a statement of support for the application (Referees must be current financial members of ACIPC).

|  |  |
| --- | --- |
| Member Name: |  |
| Member Number: |  |
| Email: |  |
| Contact Number: |  |

|  |  |
| --- | --- |
| Member Name: |  |
| Member Number: |  |
| Email: |  |
| Contact Number: |  |

*Completed application forms and relevant information will be reviewed by the ACIPC Board of Directors. All applications will be treated confidentially. The Board of Directors has accountability for determining if the applicant can be admitted to the ACIPC as a Fellow. The process may take up to three months and applicants will be advised of the outcome by mail.*

**Criteria for eligibility to Fellowship**:

Please provide a written statement (maximum 2000 words) addressing all elements of the selection criteria for the ACIPC Fellowship Category.

To apply for ACIPC Fellowship you must be:

* a current and continuous financial member of ACIPC for at least three years
* credentialled by the ACIPC at any of the three tiers

**SELECTION CRITERIA**

Each applicant must provide a written response, up to 2000 words in total, addressing the criteria listed below.

**1. Leadership**

1. Outline and provide evidence of your contribution to the infection prevention and control profession in one or more of the following areas:
   * clinical practice
   * management
   * education
   * research policy
2. Outline any relevant postgraduate education you have completed and how it relates to your leadership and contribution to infection prevention and control
3. Describe how your leadership has made a difference to the healthcare of the community

**2. Contribution to infection prevention and control**

1. Provide a detailed professional portfolio containing published or unpublished work, such as:
   * project reports
   * curriculum documents
   * successful research grant applications and reports
   * development of clinical protocols
   * evidence of implementation of change management
   * publication in refereed/non-refereed publications/books
   * evidence of other contributions to the infection prevention and control community.
2. Provide detailed examples of how you have contributed to the professional growth of infection prevention and control practitioners
3. Provide certified copies of relevant awards and or testamurs

**3. Contribution to ACIPC**

1. Continuous financial membership of ACIPC for the last three years
2. Evidence of active and significant participation in ACIPC activities for a period of at least the last two years. Examples of participation must include at least two of the following:
   * Director of the ACIPC Board or member of a Board Committee
   * Contribution to ACIPC policy submissions, guidelines or statements
   * Contribution to ACIPC publications
   * Delivery of presentation/s at ACIPC events
   * Active involvement in ACIPC conferences and/or forums
   * Representation of ACIPC in an official capacity

**References**

Every application must be accompanied by two referee statements of support, of 200 words each (including contact details). Each statement must include:

* The capacity in which the referee knows the applicant and the nature and length of the relationship
* Confirmation and support of the applicant’s claims against the selection criteria
* Evidence of current financial membership of ACIPC

**Supporting documentation**

Every application must include the following:

* Completed application form
* Current Curriculum Vitae
* Professional portfolio as described above

**Membership fee – Fellow**

* $250 annually