

Appendix 1

Application for Childcare Support for Female Academic Staff

Applicant Details

Name of Applicant

\_\_\_\_\_

Position

Academic Staff  Yes  No

\_\_\_\_\_

Faculty/School

\_\_\_\_\_

Campus/Location

\_\_\_\_\_

Contact Details Phone ( )

Fax ( )

\_\_\_\_\_

Email

\_\_\_\_\_

Name of Nominated Supervisor

\_\_\_\_\_

Date of return from last Parental Leave

\_\_\_\_\_

Conference Details

Title of Conference

\_\_\_\_\_

Location of Conference

\_\_\_\_\_

Date of Conference Presentation

Title of Refereed Paper that you are presenting at the Conference

\_\_\_\_\_

Details of this reimbursement claim

Amount being claimed \$	
Have you previously received reimbursement for childcare expenses from ACU National in relation to the presentation of this Refereed Paper at any other Conference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, when:	Amount of previous reimbursement \$

Staff Member

Signature Date: \_\_\_/\_\_\_/\_\_\_

All above details have been verified and payment is approved:

Nominated Supervisor

Signature Date: \_\_\_/\_\_\_/\_\_\_

Please forward this approved application form together with a completed Finance Payment/Reimbursement form and relevant receipts to the Finance Department for processing.