



ECIC Application Form

A: Applicant details

Title:

Name:

Institution:

Email:

Phone:

Institutional Address:

Qualification/s:

Current position:

Research Area:

Research Type: Basic Translation Clinical

Are you a practicing clinician? Yes No

If yes, please list your position:

Where are you based? AUS NZ Other

Are you a member of ANZBMS? Yes No

Are you an ECI*?

Yes

No

**Early career investigator is defined as a member of the ANZBMS who is currently enrolled in a higher degree or a current researcher within 10 years of award of a PhD/Masters considering career interruptions.*

Have you completed the ECIC questionnaire?

Yes

No

*The ANZBMS ECIC is establishing a database of ECI member profiles that allows us to better understand the skill sets, expertise, and research interests of our membership. **NB: We strongly recommend all applicants to fill out the questionnaire as it will help us identify suitable candidates.** (The questionnaire is available [here](#)).*

Please list your preference (1 to 4 – 1 being most preferred) for the ECIC subcommittee (s) the you would you like to contribute to:

Career Development

Events

Communications

Clinical

Subcommittee details can be found: <https://www.anzbms.org.au/eci-committee.asp>

**B: Please provide brief responses to the following questions
300 words max (total across questions 1–3)**

(1) What is your motivation for joining the ECIC ?

(2) What experience do you bring that is relevant to your preferred subcommittee ?

(3) Suggest one initiative that would benefit ECIs and that the ECIC should prioritise if you were elected.

C: Please provide a short biography

200 words max

Please email completed form along with your 2 page CV to ecic@anzbms.org.au