

Alan & Kate Gibson Foundation Perioperative Medicine Scholarship Application Form

The Alan & Kate Gibson Foundation Perioperative Medicine Scholarship aims to identify emerging leaders in perioperative medicine and support medical specialists committed to advancing the field. In partnership with Peter MacCallum Cancer Centre, two scholarships will be awarded for the 2027 academic year, with one reserved for a clinician working in a regional or rural setting.

Eligible applicants must be registered with AHPRA and either hold a fellowship or have completed fellowship examinations with one of the [participating colleges](#).

Each scholarship includes:

- Full course fees for the ANZCA Course in Perioperative Medicine, including registration and course completion fees.
- Coordinated access to the Peter MacCallum Cancer Centre for the clinical immersion component of Unit of study 3 – Optimisation (Trimester 2). **Please note:** Recipients must complete this clinical immersion at the Peter MacCallum Cancer Centre.
- Up to A\$3000 in reimbursable travel expenses for regional and interstate recipients attending clinical immersion at the Peter MacCallum Cancer Centre.
- Opportunities to connect with a network of past Alan & Kate Gibson scholarship recipients.

Each scholarship has an approximate total value of A\$20,000.

Important dates

Applications close	11 October 2026
Online panel interviews for shortlisted candidates	Late October 2026
Scholarship recipients announced	27 November 2026
Course and clinical immersion commence	February 2027
Expected course completion	Within 18 months from February 2027

There are **3 parts** to the application, followed by a declaration:

PART 1 - PERSONAL DETAILS

PART 2 – WRITTEN STATEMENT

PART 3 – SUPPORTING DOCUMENTATION

To assist with the reviewing process, please include the documents listed in Part 3.

Note: There is no fee to apply.

Part 1 – Personal details

AHPRA registration number: _____

Primary college: ☐ ANZCA/FPM; ☐ ACRRM; ☐ CICM; ☐ RACP; ☐ RACS; ☐ RACGP; ☐ RNZCGP; ☐ AFRM

Training status: ☐ Fellow; ☐ Trainee

If you are a trainee, please provide an estimated date of admission to fellowship: _____

ANZCA ID*: _____

Please note: Once accepted onto the course, you will be assigned an ANZCA ID if you do not have one.

First name _____

Middle name(s) _____

Surname _____

Date of birth

D	D	M	M	Y	Y	Y	Y
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Gender identity ☐ M; ☐ F; ☐ Prefer not to say; ☐ Other: _____

Address _____

Suburb/State/Postcode _____

Country _____

Phone no. _____

Email _____

Current employment (hospital name and location) _____

Part 2 – Written statement

In the box below, write a statement (maximum 500 words) explaining how you will use the knowledge gained through the ANZCA Course in Perioperative Medicine to enhance perioperative care at your hospital, in alignment with [ANZCA standards for Perioperative Medicine](#).

Continue your statement here if required:

Part 3 – Supporting documentation

Please include the following documentation with this application form:

Document 1:

- ☐ A copy of AHPRA registration certificate.

Document 2:

- ☐ Certified copy of fellowship(s) certificate(s) from one of the following specialist medical colleges:
 - Australian and New Zealand College of Anaesthetists (ANZCA), including Faculty of Pain Medicine (FPM).
 - Australian College of Rural and Remote Medicine (ACRRM).
 - College of Intensive Care Medicine (CICM).
 - Royal Australasian College of Physicians (RACP) including Australasian Faculty of Rehabilitation Medicine (AFRM).
 - Royal Australasian College of Surgeons (RACS).
 - Royal Australian College of General Practitioners (RACGP).
 - Royal New Zealand College of General Practitioners (RNZCGP).

Or

- ☐ Evidence of satisfactory completion of fellowship examinations.
- ☐ Evidence of being within 12 months (full-time equivalent) of expected completion of primary college fellowship.

Document 3:

- ☐ A copy of latest resume.

Document 4:

- ☐ A letter of support from your hospital's head of department

Declaration

I declare that the statements made and the information provided in this application form and the attached documents are true and complete.

I agree that, if awarded the scholarship, I will complete a report of 750-1000 words, which may be used in promotional material, before receiving certification as a Graduate of the Chapter of Perioperative Medicine.

I understand that if successful, I must complete the required clinical immersion experience for Unit 3: Optimisation (Trimester 2) at the Peter MacCallum Cancer Centre.

I have current AHPRA registration and agree to notify ANZCA if my registration is withdrawn or suspended, or conditions or restrictions are imposed that limit my unconditional registration in Australia.

Signature: _____ Date: _____

Please send your completed application form and the required supporting documentation to periop@anzca.edu.au with **2027 Alan & Kate Gibson Foundation Perioperative Medicine Scholarship Application** as the subject title. The ANZCA Course in Perioperative Medicine handbook and other documents are available on the [ANZCA website](#).