# Asthma & Spirometry Update

### for Aboriginal Health Workers & Practitioners



# **Workshop Request Form**

0	DRGANISATION		
	Host Organisation Name:		
	Street address: (not PO Box)		
	Suburb:	State:	Postcode:

#### CONTACT PERSON

Name	
Position	
Contact numbers	
Email	

### **PROPOSED WORKSHOP**

Days and Dates (Max. 3 in order of preference)	1.	2.	3.
Times (Allow 4 hours, including breaks)			
Location (Suburb or town)			Postcode:

#### **ESTIMATED ATTENDANCE**

AHW / AHPs:	Nurses:	Other health professionals:
-------------	---------	-----------------------------

#### Confirmation

On confirmation of workshop date(s), formal notification will be sent to your organisation via email. Up to \$1,000 is available to assist with the costs of hosting a workshop (subject to budget approval). Expenses will be reimbursed post-event on receipt of workshop report, tax invoice and statement of expenditure.

This organisation would like to host an Asthma Update for Aboriginal Health Workers & Practitioners workshop. This organisation agrees to monitor applicable <u>government travel restrictions and advisories</u> and follow all state or territory health department COVID-19 guidelines.

Name	Date	
Please return this form to:	Sal Lokvancic, Project Co-ordinator Clinical & Education Email: <u>sal.lokvancic@nationalasthma.org.au</u>	

Office use only Received:		Logged:	
	Suite	104, 153-161 Park St. South Melbourne VIC 3205, Australia	



Supported by the Australian Government Department of Health