

### FELLOW OF ISBS APPLICATION FORM

**Section 1. Personal Details**

|  |  |
| --- | --- |
| Full Name, including Title: |  |
| Academic Qualifications: |  |
| Current Position: |  |
| Institution: |  |
| E-mail:  |  |
| I certify that I am a current ISBS member and have been a member of ISBS for at least five consecutive years. | **[ ]**  |
| I have read the Award Criteria and I certify that I adhere to all the Award Criteria (www.isbs.org).  | **[ ]**  |

**Section 2. Applicant’s Nominator**

The applicant’s proposer must submit an e-mail to the VP of Awards by the closing date with the following statement: I certify that I support the applicant’s application for Fellow of ISBS.

|  |  |
| --- | --- |
| Full Name, including Title: |  |
| E-mail:  |  |

**Section 3. Contributions to Sports Biomechanics**

|  |  |
| --- | --- |
| Please provide your best two presentations at ISBS conferences in APA format |  |
| Please provide a list of your five best peer-reviewed publications on Sports Biomechanics in APA format (minimum of three as first author) |  |
| Please state how and when you have served ISBS e.g. board director |  |

**Declaration**

|  |  |
| --- | --- |
| I hereby certify that the information I have supplied in this application is correct at the time of writing.  | **[ ]**  |
| Date: |  |

Please e-mail the completed application form to the VP of Awards, Dr Elizabeth (Liz) Bradshaw, Elizabeth.bradshaw@acu.edu.au