

RURAL ALLIED HEALTH – Postgraduate Scholarship Program 2010

Project funded by Victorian Department of Health

Name: _____

Health Profession: _____

University Course: _____

*Please attach
a recent
passport size
photo to
assist in
interviews*

Important Information:

- Information that you provide on this Application Form and in the additional requested documents is the only information that will be considered in the selection and ranking process
- It is very important that you make sure you have given all the relevant information for each section on this form
- Should you be short-listed you may be required to attend an interview
- The number of scholarships awarded is subject to available funds
- For the purposes of taxation, money from the scholarship scheme is considered as income

Explanatory Notes:

- Do not send originals of any supporting documentation requested, as these documents will not be returned to you
- Your Application Form should be accompanied by the additional documents referred to in Section D and in the correct order (see Additional Information Required on page 3)
- Do not bind your application or put it in plastic sleeves: a staple in the top left hand corner is sufficient
- Read this Application Form and the separate Guidelines before filling in the Application Form
- Use blue or black ink
- Answer all questions on this Application Form
- If there is insufficient space to record your response to any question, please attach additional pages as required. Be sure to note your name and the question number(s) on the page
- Where a question can be answered by marking a box, place an **X** in the box

APPLICATIONS MUST BE RECEIVED BY 12 FEBRUARY 2010

Section A - APPLICANT DETAILS	
<p>Your name: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/></p> <p>Surname:</p> <p>First Name:</p> <p>Date of Birth:/...../.....</p>	<p>Citizenship:</p> <p>Are you an Australian citizen or permanent resident of Australia?</p> <p>No <input type="checkbox"/> You are not eligible to apply</p> <p>Yes <input type="checkbox"/> A certified copy of your birth certificate, naturalisation or other official documents such as passport may be requested should you be selected to receive a scholarship</p>
<p>Home Address:</p> <p>Street:</p> <p>Town/Suburb:</p> <p>State/Territory: Postcode:</p> <p>Telephone Number:</p> <p>Mobile Phone Number:</p>	<p>Aboriginal/Torres Strait Islander:</p> <p>Do you identify yourself as:</p> <p>Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/></p> <p>Employment</p> <p>Current Employer:</p> <p>Position Held:</p> <p>Period of Employment:</p> <p>From..... (Month and year)</p>
<p>Work Address:</p> <p>Street:</p> <p>Town/Suburb:</p> <p>State/Territory:Postcode:</p> <p>Telephone Number:</p> <p>Email address:</p> <p>My preferred mailing address is:</p> <p>Home Address <input type="checkbox"/> Work Address <input type="checkbox"/></p>	<p>Other Information:</p> <p>Have you previously or are you currently receiving funding from another scholarship or grant program?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If Yes:</p> <p>Name of Scholarship/Grant:</p> <p>Duration of Funding: From..... To.....</p> <p>Amount: \$.....</p>



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Section B – EDUCATION DETAILS	
<p>Proposed Tertiary Education</p> <p>Course to be studied:</p> <p>.....</p> <p>University:</p> <p>Length of Course:</p> <p>Full Time <input type="checkbox"/> Part Time <input type="checkbox"/></p>	<p>Relevant Qualifications Completed</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
Section C – REFEREES	
<p>Please ensure your referees can be contacted</p>	
<p>Name:</p> <p>Address:</p> <p>.....</p> <p>Phone:</p> <p>Email address:</p>	<p>Name:</p> <p>Address:</p> <p>.....</p> <p>Phone:</p> <p>Email address:</p>
Section D – ADDITIONAL INFORMATION REQUIRED	
<p>The following additional information is required as part of your application. Please attach these documents to your Application Form in the following order:</p> <ol style="list-style-type: none"> 1. A 500 word summary demonstrating: <ul style="list-style-type: none"> • The relevance of your postgraduate study to service demands within your health service and in rural Victoria generally • Your understanding and experience of rural communities and practice • Your interest in, and commitment to future rural practice in Victoria • How this scholarship will assist you in beginning your postgraduate studies 2. Curriculum Vitae 3. Full information on the course being undertaken 4. Evidence of your current employment 5. A letter of support from your Supervisor, Manager or CEO 	



