

Vacational Scholarship Application Form

Personal and program details

Given name:	Family name:
Student Number:	Phone:
Email:	Program:
Year level:	

Scholarship

Date available to commence four week scholarship (January 2016) : In 100 words or less, explain how this opportunity will benefit you:

Checklist:

All parts of this checklist must be completed for the application to be considered. Please complete this checklist prior to submission:

Available to undertake six week scholarship from January 2016

Responsibilities of the successful applicant has been read and understood

- Prepared an updated CV to be submitted with the application form
- Applicant Declaration signed

CRICOS PROVIDER 00123M

adelaide.edu.au

seek LIGHT

Applicant declaration

I declare that, to the best of my knowledge, the information supplied in this application and the documentation supporting it is true and complete. I acknowledge that the provision of false information or documentation or the withholding of information or documentation relating to my application may result in the cancellation of any scholarship by the University of Adelaide, School of Nursing. I confirm that I have read and understood the responsibilities and the conditions of the scholarship. I authorise the University of Adelaide, School of Nursing, to obtain, where necessary, further information regarding this application from other relevant bodies. I understand that the scholarship process is competitive and that not all applicants who meet the eligibility criteria can be awarded a scholarship. By signing below, successful applicants are giving consent to the University of Adelaide, School of Nursing, to be disclosed to the donor organisation, and to the media, if desired for promotional purposes.

Signature:

Date: / /

Applicant submission

Applications close on 27 November 2015 at 5pm. One emailed copy (in PDF format) of the application including a current CV is to be submitted to:

Dr Tim Schultz Email: <u>tim.schultz@adelaide.edu.au</u> Phone: 08 8313 6270

Privacy Statement

The University of Adelaide, School of Nursing, is providing you with this notice because the School of Nursing has sought personal information about you. The School of Nursing needs this information so that it can fully and properly assess your application in accordance with its policies and procedures. The information you supply on this form and in any documentation supplementary to this application may be provided to scholarship selection authorities.

OFFICE USE ONLY

Committee's recommendation

Provide justification reason(s) as to why the scholarship is being awarded.