



Applications must be emailed to:

Ms Stefania Demurtas
Scholarship Program Manager, Office of University Relations
The University of Notre Dame Australia
scholarships@nd.edu.au

Please note: applications must be emailed as **one** PDF attachment.

INFORMATION TO ASSIST YOUR APPLICATION SUBMISSION

- Complete only **one** application form if you are applying for multiple scholarships listed on the same form.
- Check the Scholarship Conditions online carefully to ensure you are eligible to apply for the scholarship.
- Write clearly.
- Answer all the questions and address all the Selection Criteria of each scholarship you are applying for.
- Complete the Student Declaration section.
- Submit your application by the closing date. **Late applications will not be accepted.**
- Make sure you have enclosed all the information and documents required. **Incomplete applications will not be considered.**

For further information please visit our Frequently Asked Questions section on the University website.

Please indicate in this section the scholarship(s) you wish to apply for:

Each scholarship will be listed on its respective webpage.

- | | |
|--|--|
| <input type="checkbox"/> The Beasley Family Scholarship in Medicine and Nursing | <input type="checkbox"/> The MADAL Scholarships in Medicine |
| <input type="checkbox"/> The Bradley Richards Scholarship in Physiotherapy | <input type="checkbox"/> The Master of Burn and Trauma Rehabilitation Travel Scholarship |
| <input type="checkbox"/> The Clem & Rita Honner Perpetual Scholarship in Nursing | <input type="checkbox"/> The Morris Research Scholarship |
| <input type="checkbox"/> The D'Souza Family Scholarship | <input type="checkbox"/> The Ramsay Health Care WA Scholarship |
| <input type="checkbox"/> The Frank Reedy Scholarship in Medicine | <input type="checkbox"/> The Southern Cross Care Nursing Student Scholarship |
| <input type="checkbox"/> The Fremantle Heart Patients Support Group
- Hugh Jones Memorial Scholarship | <input type="checkbox"/> The St John of God Health Care
- Dr Michael Quinlan Medical Elective Scholarship |
| <input type="checkbox"/> The Geraldine Merchant Scholarship in Nursing | <input type="checkbox"/> Personal and Professional Development Visiting Scholarship |
| <input type="checkbox"/> The Holm Family Scholarship in Nursing | |

1. CURRENT STUDY

- 1.1 Degree enrolled in at The University of Notre Dame Australia
- 1.2 School
- 1.3 Date entered / / Expected completion date / /
- 1.4 Year of study you are currently in First year Second year Third year Fourth year Fifth year

2. PERSONAL INFORMATION

- 2.1 Title Surname/Family name First name Second/Middle name
- Preferred first name Date of birth / / Age
- Gender Male Female Student Id Number

2. PERSONAL INFORMATION (continued)

2.2 Term address for 2021

Number and street

Town/Suburb State Postcode

Telephone (home) Mobile

Email

2.3 Permanent home address (if different from above)

Number and street

Town/Suburb State Postcode

2.4 Citizenship and residency status (please tick the appropriate box)

Australian Citizen Australian Permanent Resident New Zealand Citizen International student

2.5 Aboriginal and Torres Strait Islander background (please tick the appropriate box)

Neither Aboriginal nor Torres Strait Islander origin Aboriginal origin Torres Strait Islander origin

Aboriginal and Torres Strait Islander origin

3. PREVIOUS STUDY (to be completed by commencing students only)

3.1 Previous degree or course of study

3.2 Name of institution

3.3 Academic results

ATAR (to be completed by school leavers only)

WAM

GPA

4. CURRENT FINANCIAL SITUATION

4.1 Do you personally receive a means tested Commonwealth income support payment (i.e. Austudy, Youth Allowance, ABSTUDY etc.)?

Yes, please complete question 4.2 No, please go to questions 4.3

4.2 Please tick the relevant box and detail the gross amount you receive per fortnight.

<input type="checkbox"/> Youth Allowance	Amount per fortnight	<input type="text"/>
<input type="checkbox"/> AUSTUDY	Amount per fortnight	<input type="text"/>
<input type="checkbox"/> ABSTUDY	Amount per fortnight	<input type="text"/>
<input type="checkbox"/> Disability Support Pension	Amount per fortnight	<input type="text"/>
<input type="checkbox"/> Pensioner Education Supplement	Amount per fortnight	<input type="text"/>
<input type="checkbox"/> Sole Parent Pension	Amount per fortnight	<input type="text"/>
<input type="checkbox"/> Carer Pension	Amount per fortnight	<input type="text"/>
<input type="checkbox"/> Veterans' Affairs Payment	Amount per fortnight	<input type="text"/>

Please include a **full copy** of a current Centrelink Income Statement dated within the last three months or other appropriate documentation confirming the level of your current payment. A Centrelink Income Statement can be obtained by calling Centrelink on 13 24 90. Please allow 4-5 working days from the date you request the Income Statement and factor this into the timeline in respect of the closing date for scholarship applications. Alternatively you can go into a Centrelink office and request an Income Statement over the counter.

4.3 Have you ever applied for a means tested Commonwealth income support payment?

Yes Type of payment

Date of application / /

If your application was declined, please provide details as to the reason why (e.g. level of parents' income, value of family farming property, level of family assets, etc.)

No

4.4 Have you been awarded any other scholarship to assist with your university expenses or living costs in 2021?

Yes Name of scholarship Amount

Date awarded / / Frequency of payment

Duration of scholarship

No

4. CURRENT FINANCIAL SITUATION (continued)

4.5 Please indicate your status:

- Single (living at home) Single (independent) Sole parent/carer Partnered, no dependants
 Partnered, dependants. Number of dependants under 18 Other (specify)

4.6 What is your gross average fortnightly income?

If you are not sure of your income or expenses, please provide your best estimate of your financial situation for 2021.

- Individual income Partnered/combined income Family income (if you are dependent on your family's income)

Fortnightly Income	Amount \$
Salary/wages (gross)	<input type="text"/>
Commonwealth supported payment (e.g. Austudy, Youth Allowance)	<input type="text"/>
Assistance from family	<input type="text"/>
Child Support	<input type="text"/>
Scholarships/grants/awards	<input type="text"/>
Other (e.g. shares, investments, interest, etc.)	<input type="text"/>
Total	<input type="text"/>

4.7 What are your average fortnightly expenses?

- Individual expenses Partnered/combined expenses Family expenses (If you are dependent on your family's income)

Fortnightly Expenses	Amount \$
Rent/board/mortgage	<input type="text"/>
Food/groceries	<input type="text"/>
Phone, power, utilities	<input type="text"/>
Transport (Transperth, car costs including insurance, registration, etc.)	<input type="text"/>
Childcare	<input type="text"/>
Loan repayments	<input type="text"/>
Incidentals/other	<input type="text"/>
Total	<input type="text"/>

4.8 What is your average fortnightly surplus/deficit?

Surplus Deficit

5. PERSONAL STATEMENT (compulsory)

In your Personal Statement you must address the Selection Criteria of each scholarship you are applying for. Use each of the Selection Criteria as headings.

It is essential to respond to each criterion, writing at least one to two paragraphs explaining how you have demonstrated the particular skill, quality, or need. If relevant, provide examples from your work, study or community roles. Your Personal Statement should be a minimum of 400 and a maximum of 800 words.

6. STUDENT CHECKLIST

Ensure you have answered all the questions in your Application Form and attached all the following documents:

Y N

- Completed Application Form (compulsory)
- Personal Statement addressing the Selection Criteria (compulsory)
- Curriculum Vitae (compulsory)
- Two reference letters (compulsory)
- Copy of academic transcript from previous studies if you are a commencing student (compulsory)
- Copy of current academic transcript from Notre Dame if you are a current student, downloadable from MyND Portal (compulsory)
- Copies of AUSTUDY, Youth Allowance Payments (if applicable)
- Evidence of a disability or chronic medical condition (if applicable)
- Any other specific document listed in the Conditions of the scholarship(s) you are applying for (e.g. elective proposal, letter of recommendation from the Associate Dean Clinical, proof of rural background, practicum report, etc.)

Please allow up to three months to receive the outcome of your application. All applicants will be notified via email.

7. STUDENT DECLARATION

Privacy and Confidentiality Statement

The Office of University Relations will not disclose any information supplied in this Application Form without written consent of the applicant. The information supplied will only be used for the selection process of the scholarship(s).

- By ticking this box and writing my name I declare that the information that I have supplied on this form is true and correct to the best of my knowledge. I understand that my Scholarship may be cancelled if it is proven that I was offered a scholarship based on false or misleading information or documentation. I also understand that giving false or misleading information is a serious offence under the *Criminal Code*.

Full name

Date

 / /

OFFICE USE

DATE RECEIVED:

SIGNATURE:

STAFF MEMBER: