

HAND WRITTEN APPLICATIONS WILL NOT BE ACCEPTED

1. APPLICANT DETAILS

Name

NSWNMA member no. Email

Phone 1. 2.

Mailing address

Postcode

2. WORKPLACE DETAILS

Current position title

Current Workplace/s

1. (Primary)

2.

3. SCHOLARSHIP REQUEST

Course name

Institution / Course Provider

Commencement date Expected completion date

4. DECLARATION OF OTHER FINANCIAL SUPPORT

Have you applied for, or received, financial support for this course from another source? Yes No
If YES please provide details: the amount, the terms and the source of funding.

Have you received a scholarship from this or any other organisation in the past three (3) years? Yes No
If YES please give details including amount and year awarded.

5. ACADEMIC RECORD

Qualification Obtained	Name of Institution	Year of Graduation

6. PERSONAL STATEMENT

Your statements assist us to assess your application against others. Please be specific in your response. Please state:

Why you want to apply

What benefits you will gain from this scholarship and from the course

How you will use the learning in your work in aged care

7. REFERENCES

You must attach one (1) written and signed reference with this application supporting your request. Professional reference must come from someone who can comment on you and your work (e.g. manager, educator).

Attach with the application form, a letter from your employer on letterhead confirming:

- » your name,
- » employment status,
- » how long you have been employed in this position,
- » confirmation that as your employer, they are not providing any financial support to you in the undertaking of these studies, and
- » a brief statement outlining their support for you in applying for this scholarship.

Name	<input type="text"/>		
Position Title	<input type="text"/>		
Place of work	<input type="text"/>		
Relationship to applicant	<input type="text"/>		
Email	<input type="text"/>	Phone	<input type="text"/>

8. COMMENTS

Any other comments you wish to add to your application?

9. DECLARATION

Your signature indicates that

- » you have read and agree with the OPWC Aged Care Scholarships Terms;
- » you are a permanent Australian citizen / permanent resident;
- » you have provided information that is true and correct;
- » you give permission for the Selection Committee to contact your nominated referee if required;
- » you have attached supporting documentation as outlined in the scholarship information and terms.

Signature

Date

**Email your completed application & supporting documents to education@nswnma.asn.au
Applications close, 5pm, Monday 31 May 2021.**