Mildura La Trobe University Foundation Scholarships

ELIGIBILITY GUIDELINES

1. Purpose

The Mildura La Trobe University Foundation scholarships have been established to support students studying at the Mildura campus.

2. Eligibility Criteria

Before making application please read the following eligibility criteria.

2.1. Applications will only be considered for commencing students at the Mildura campus in 2013.

3. Application Process


3.2. Referees cannot be family members.

3.3. The application will be assessed by the Mildura La Trobe University Foundation Fund Board.

3.4. The board reserves the right to seek additional information in respect of the application if it deems this to be necessary.

3.5. The Mildura La Trobe University Foundation Fund Board will make a recommendation in respect of the application and this recommendation will go to the Scholarships office which is responsible for financial management of the scholarship.

3.6. Only completed applications received by close of business on the due date for each funding round will be considered. Incomplete application forms will be returned to the applicant for additional information. Should the additional information not be provided within the asked timeframe, the application will be considered incomplete and returned to the applicant.

3.7. All applications will be treated as strictly confidential and only discussed with the Mildura La Trobe University Foundation Fund Board or relevant individuals for whom a signed release of information consent form has been obtained.

3.8. Scholarships are available up to $3,000 per student.

3.9. Applications close **Wednesday 13 March 2013**.
APPLICATION CHECKLIST

Dear Applicant,

To ensure that your application to the Mildura La Trobe University Foundation Fund Board has the best chance for success it is important to include all relevant information.

Please use this checklist to ensure that all necessary information is included in your application.

Applications without the necessary information will not be considered for funding.

- Signatures of Applicant
- Referee Check 1
- Referee Check 2
- Estimated costs of funding required (please be as detailed and specific as possible)

Please post the completed application to:

Rebecca Cameron
La Trobe University
Mildura Campus
PO Box 4095
Mildura
VIC 3500

Alternatively a hard copy can be dropped into campus reception at the Benetook Avenue Campus attention Rebecca Cameron.

(Emailed or faxed applications will not be accepted)
APPLICATION FORM

This application form is to be completed by the applicant. You may attach additional information if you believe it will provide relevant information to assist the committee in their deliberations.

This application is confidential and will only be viewed and discussed by members of the Mildura La Trobe University Foundation Fund Board. All members of the Mildura La Trobe University Foundation Fund Board are bound by the La Trobe University Privacy Policy.

You will be notified in writing of the outcome of your application.

Details of Applicant

Surname: ________________________________________________

First name: ______________________________________________

Date of Birth: _____/_____/______ Age at date of Application: ____

Student number __________________________________________

Contact details of Applicant

Postal Address: ____________________________________________

_________________________________________________________________

Home Phone No: ______________ Mobile number: _______________

Email Address: _____________________________________________

Please complete the following questions:

1. Please indicate what the applicant needs

   - [ ] Assistance with the costs of undertaking an undergraduate course at the Mildura campus
   - [ ] Assistance with the costs of undertaking a postgraduate course at the Mildura campus
   - [ ] Assistance with the costs of undertaking research at the Mildura campus
   - [ ] Assistance with the costs of buying tools or equipment related to a university course
   - [ ] Assistance with the cost of study abroad
   - [ ] Other

Please specify: ________________________________________________
What course have you applied for or are already studying at the Mildura campus? (Please attach a copy of your enrolment details)

Course name ____________________________________________________________

Faculty/school __________________________________________________________

Year (please tick)

☐ Commencing student this year (1st year)
☐ 2nd year
☐ 3rd year
☐ 4th year
☐ Postgraduate
☐ Research

**Education and/or training background**

Please provide information about where your education background:

<table>
<thead>
<tr>
<th>What is your highest level of education participation prior to the commencement of your current course?</th>
<th>Completion year:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Completed Higher Education postgraduate course</td>
<td>☐ ☐ ☐ ☐</td>
</tr>
<tr>
<td>☐ Completed Higher Education Bachelor level course</td>
<td>☐ ☐ ☐ ☐</td>
</tr>
<tr>
<td>☐ Completed final year of secondary education or TAFE</td>
<td>☐ ☐ ☐ ☐</td>
</tr>
<tr>
<td>☐ Completed other qualification or certificate of attainment or commencement</td>
<td>☐ ☐ ☐ ☐</td>
</tr>
<tr>
<td>☐ No prior educational attainment</td>
<td>☐ ☐ ☐ ☐</td>
</tr>
<tr>
<td>☐ Completed a Vocational and Technical Education course (eg TAFE)</td>
<td>☐ ☐ ☐ ☐</td>
</tr>
<tr>
<td>☐ Have started but not completed a Vocational and Technical Education course (eg TAFE)</td>
<td>Last year of participation: ☐ ☐ ☐ ☐</td>
</tr>
</tbody>
</table>

Secondary school attended? ________________________________________________

What was your ATAR/ENTER/TER (if known)? ________________________________

If you are applying as a mature age student (21 years of age or older), please tell us, in 250 words or less, about your previous work or educational experience.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Assistance Required

Please indicate, in 250 words or less, what the assistance from the Mildura La Trobe University Foundation is being sought for:
(Please indicate the estimated cost of the assistance required)

<table>
<thead>
<tr>
<th>Item</th>
<th>Estimated Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accommodation expenses while attending Uni</td>
<td></td>
</tr>
<tr>
<td>Living expenses while attending Uni</td>
<td></td>
</tr>
<tr>
<td>Text books</td>
<td></td>
</tr>
<tr>
<td>Computer/Lap Top</td>
<td></td>
</tr>
<tr>
<td>Non-deferrable course fees</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>Please state:</td>
<td></td>
</tr>
</tbody>
</table>

Personal Profile Section

Please provide information about assist the selection committee with their deliberation. Leave blank any section that is not applicable.

Family background? (please list where you grew up and some background information about your family)

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Part – time employment?
________________________________________________________________________

Work experience – formal or voluntary?
________________________________________________________________________

Involvement in community groups and/or clubs?
Sporting or cultural interests?
CONFIDENTIALITY

PLEASE ENSURE YOU ARE FAMILIAR WITH THE FOLLOWING INFORMATION PRIOR TO SIGNING AND SUBMITTING THIS APPLICATION.

- All information obtained during the application process is confidential and cannot be released outside the Mildura La Trobe University Foundation Fund Board without your approval.
Authority for Mildura La Trobe University Foundation Fund Board to obtain/release information

I/We the undersigned hereby authorise the Mildura La Trobe University Foundation Fund Board to obtain/release information from/to:

Signatures

Applicant

Referees (the person who has provided information in the referee report)

1. ________________ (Insert name of organisation/individual)
   of (address) ________________________________

2. ________________ (Insert name of organisation/individual)
   of (address) ________________________________

OTHERS (any other professional who may have relevant information to enhance the application)

______________________________ (Insert name of organisation/individual)
of (address) ________________________________

______________________________ (Insert name of organisation/individual)
of (address) ________________________________

Date: ______ / _____ / _____
Referees will need to be people not related to the applicant. They could be: a Principal, a Student Welfare Coordinator, a teacher, an employer or somebody from an organisation the applicant may be involved with. The information provided is confidential and will only be viewed and discussed by members of the Foundation Fund board.

Name of Applicant: _______________________________________________________

Name of Referee: __________________________________________________________

Title of Referee: __________________________________________________________

Postal address of Referee: __________________________________________________

1. How do you know the applicant?
________________________________________________________________________
________________________________________________________________________

2. How long have you known the applicant?
________________________________________________________________________
________________________________________________________________________

3. Please indicate, in 250 words or less, why you believe they should receive financial support from the Mildura La Trobe University Foundation?
________________________________________________________________________
________________________________________________________________________

4. Any other comments?
________________________________________________________________________
________________________________________________________________________

Signature of Referee: __________________________  Date: ___/___/____
Referees will need to be people not related to the applicant. They could be: a Principal, a Student Welfare Coordinator, a teacher, an employer or somebody from an organisation the applicant may be involved with. The information provided is confidential and will only be viewed and discussed by members of the Foundation Fund board.

Name of Applicant: _______________________________________________________

Name of Referee: _________________________________________________________

Title of Referee: _________________________________________________________

Postal address of Referee: ___________________________________________________

5. How do you know the applicant?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

6. How long have you known the applicant?
________________________________________________________________________
________________________________________________________________________

7. Please indicate, in 250 words or less, why you believe they should receive financial support from the Mildura La Trobe University Foundation?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

8. Any other comments?
________________________________________________________________________
________________________________________________________________________

Signature of Referee: _______________________________________________________
Date: ___/___/____