



**APPLICATION FORM – APRIL DVM/VETERINARY SCIENCE SCHOLARSHIP AWARD**

**Name of Applicant:**

Address:

Phone:

Email:

**Name of University:**

Contact Person:

Position:

Postal Address:

Street Address: *(if different)*

Phone:

Email:

**Student's Supervisor(s):**

Position(s):

**Summary of project and experimental plan [include research training outcomes and relationship of project outcomes to APRIL research priorities, and a communication/delivery plan (if appropriate). Please use additional pages if necessary]**

**Proposed Commencement:**

**Proposed Completion:**

Is the proposal related to an existing APRIL research project?  Yes  No

If yes, give project details:

**Applicant's course of study and progress to date (include any research projects and training undertaken to date and outcomes):**

Academic Institution:

Course/Award:

Progress:

Full-time or part-time study: please indicate here:

**BUDGET REQUESTED from APRIL: \$**



**CERTIFICATION BY ACADEMIC INSTITUTION**

**SUPERVISOR'S RATING OF STUDENTS TRACK RECORD:**

- OUTSTANDING: TOP 10%**
- EXCELLENT: TOP 20%**
- VERY GOOD: TOP 30%**
- GOOD: TOP 40%**

**Justification of ranking:**

I certify that the applicant, **<student's name>**, is a suitable candidate for the research award proposed

*\*Signature*

*Name*

*Date:*

*Position*

*(\* Must be signed on behalf of the applicant's academic institution by a person authorised to make this declaration)*

Checklist of additional required information to be provided:

- Student's Academic Transcript.
- Student's Personal Statement (to be signed by the student) outlining reasons for applying for a Scholarship.
- Student's *Curriculum vitae*.
- Supervisor's *Curriculum vitae* (If supervisor has not previously supervised a student with Pork CRC, APL or APRIL).