The Australian Wool Education Trust supports the scholarships listed below. Indicate which scholarship is the subject of this application by marking the appropriate check box.

| **Scholarship Details** |
| --- |
|  | *Number* | *Duration* | *Stipend* |  |
| *Undergraduate Project Scholarship* | *15* | *1 Year* | *$7000* | [ ]  |
| *Masters by Course Work Scholarship* |  | *1 Year* | *$7000* | [ ]  |

Note: The number of scholarships may be varied at the Trust’s discretion.

|  |
| --- |
| **Applicant Details** |
| *First Name(s)* |       | *Last Name* |       |
| *Date of Birth (dd/mm/yyyy)* |       |
| *Country of Birth* |       |
| *Address* |
| *Street* |       |
| *Suburb/Town* |       | *State* |       | *Postcode* |       |
| *Postal Address (if different from above)* |
| *PO Box* |       |
| *Suburb/Town* |       | *State* |       | *Postcode* |       |
| *Contact Details* |
| *Telephone* |       | *Mobile* |       |  |  |
| *e-mail* |       |
| *Present Occupation* |       |

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| --- |
| **Residency Status**(You must be an Australian Citizen or Permanent Resident to be eligible for this scholarship) |
| *Are you an Australian Citizen? (Yes/No)*(You must be an Australian Citizen or Permanent Resident to be eligible for this scholarship) |       |
| *Will you have lived in Australia continuously for 12 months prior to the closing submission date of this application? (Yes/No/NA)* |       |
| *Has the Department of Immigration, Local Government and Ethnic Affairs granted you permanent resident status? (Yes/No/NA)* |       |

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| **Proposed Place of Study** |
| *Name(s) of Institution* | *Name of Educational Award (eg Bachelor of Agriculture)* |
| *1.* |       |       |
| *2.* |       |       |
| *Have you received an early acceptance into any institution/award? If yes please state which institution and award* |       |

| **Financial Support** |
| --- |
| *Do you currently hold any awards or scholarships? If Yes, please provide details below* |  |
| Name of Award |       | *Annual monetary value* |       | *Duration of award (start and end dates)* |       |
|  |
| *Have you previously held any awards or scholarships? If Yes, please provide details below* |  |
| Name of Award |       | *Annual monetary value* |       | *Duration of award (start and end dates)* |       |
|  |
| *Have you applied for any other awards for the next academic year? If Yes, please provide details below.* |  |
| Name of Award |       | *Annual monetary value* |       | *Duration of award (start and end dates)* |       |
|  |

| **Selection Criteria(p**lease outline in brief your statement of claim against each criterion. DO NOT attach additional information)*For questions that require more than one line of information, the text box will automatically extend as text is entered.* |
| --- |
| *Please provide a summary of the expected outcomes of the proposed research project.* |
|       |
| *Please describe the expected design of the proposed research project and the data collection methodology.* |
|       |
| *Applicants for Undergraduate Project or Masters by Course Work Scholarships can also meet the preceding criteria by enrolling in one of more of the units offered by UNE. If this is your intention then please indicate the unit(s) involved.* |
|       |
| *The proposed studies or research should be clearly linked to the wool and/or wool/textile industry and should assist in preparing the applicant to participate in the industry if he/she so choses. Please describe how your proposed studies or research will meet these criteria.* |
|       |
|  |
| **PROPORTIONING OF OPERATIONAL EXPENDITURE** |
| *Both the Undergraduate Project Scholarship and the Masters by Course Work scholarships include an operational component. The default for the former is 50% of the total value of the scholarship. However, applicants can negotiate a variation of this split up with their sponsoring institution. If you have negotiated a variation please indicate the proportion for the operational component.* |
|       |

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| --- |
| **Referee’s Details** |
| *Please provide details of the referee who will support your application.* Please arrange for a Confidential Referee Report to be forwarded direct to The Secretary of Trustees by the nominated referee  |
| *Referee’s Name* |       |
| *Organisation* |       |
| *Position* |       |
| *Telephone* |       | *Mobile* |       |  |  |
| *e-mail* |       |

I certify that all information completed in this application is true and correct.

I acknowledge that the application must be submitted as requested in the application instructions or it will not be considered eligible.

I give permission for my details to be used within activities of the programs managing the scholarships.

|  |  |  |  |
| --- | --- | --- | --- |
| [ ]  | Tick box to indicate consent | Date:  |       |

**PLEASE NOTE APPLICATION DEADLINE PUBLISHED ON www.woolwise.com**

**NO LATE APPLICATIONS WILL BE ACCEPTED**