

PRINCE HENRY'S INSTITUTE  
Application for Vacation Scholarship

Please use block letters

Name: \_\_\_\_\_

Given Names

\_\_\_\_\_

Surname

Mr/Mrs/Miss/Ms: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Postcode

Phone: (home) \_\_\_\_\_

(work): \_\_\_\_\_

(mobile): \_\_\_\_\_

Minimum of one contact phone number

email: \_\_\_\_\_

Are you a permanent resident of Australia?

Yes  No

If no, do you hold a valid work permit?

Yes  No

Please note that eligibility to work in Australia is a condition of this scholarship.

University enrolled: \_\_\_\_\_

Degree: \_\_\_\_\_

Current course year: \_\_\_\_\_

If vacation scholarship held previously, give date(s): \_\_\_\_\_

**ACADEMIC RECORD TO DATE:**

Please attach a copy of your academic transcript to the application. A web print out is OK.

Are you considering undertaking further studies at PHI?

Yes – Honours  Yes - Masters

Yes – PhD  No

If so through which university? \_\_\_\_\_  
name of university or undecided

**Laboratory in which you propose to work:**

Applicants are advised to contact proposed supervisor prior to application. See Student Handbook or website [www.princehenrys.org](http://www.princehenrys.org).

PHI Supervisor: \_\_\_\_\_

PHI Laboratory: \_\_\_\_\_

**Vacation Period:**

Please indicate first, second and third preference.

Nov 9 to Dec 18, 2009

Nov 30 to Dec 18, 2009 AND Jan 4 to 22, 2010

Jan 11 to Feb 19, 2010

**Short title of proposed project:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Brief summary of interest in medical research and reason for applying for Vacation Scholarship (what you hope to get out of this experience):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Name, phone number, postal and email addresses of**

**2 referees:** Applicants should provide at least 2 referee's reports.

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

**Please forward two copies of your application\* to:**

*\*Incomplete applications will not be considered*

Dr Neil Owens

mail: Prince Henry's Institute  
PO Box 5152, Clayton, VIC 3168

email: [neil.owens@princehenrys.org](mailto:neil.owens@princehenrys.org)

**Closing Date:** 16 October