

RURAL HEALTH CAREERS PROMOTION GRANT

Application Form 2019

Please ensure that you have read the **RWAV “Rural Health Careers Promotion” Grant Application Guidelines 2019** before completing your application. If you have any questions regarding the selection process, please contact FutureWorkforce@rwav.com.au.

Applications open Tuesday 1 January 2019

Complete this application form and return to:

Email: FutureWorkforce@rwav.com.au

Mail: Future Workforce Program Officer
Rural Workforce Agency, Victoria
Level 6, Tower 4, World Trade Centre
18 – 38 Siddeley Street,
Melbourne VIC 3005

1. Personal details

First name:	Surname:
Postal address:	Town:
Postcode:	Phone:
Email:	

2. University details

University:	Campus:
Course:	Year of course completion:

Are you a bonded medical student? Yes No

3. Career details

Career position:

Please provide details about your career pathway:

4. Rural Background Details (if applicable)

To meet the regional and rural residency criteria: Applicants must have lived for at least five years consecutively or 10 years cumulatively after birth in a place classified by the Australian Geographic Classification - Modified Monash Model system as level MM 2-7 <http://www.doctorconnect.gov.au/locator>.

Do you have a rural background? Yes No

Residential Address:

Town:

Postcode:

State:

Duration of
residence:

5. Responses

Why are you interested in promoting rural health careers?

What activity/event do you intend to undertake?

Name of the event:

Date of the event:

How many people are attending?

What is the estimated cost associated with the activity/event?

Who is the target audience?

How are you going to promote rural health careers at the event?

Do you require any resources from, RWAV? If yes, please provide details.

How do you intend to use this grant and how will it assist you to undertake your rural health careers promotion activity?

Do you have any previous experience in promoting rural health careers?

4. Agreement

Name of applicant:

Date:

In submitting this application form, I agree to accept the conditions of the grant as outlined in this document and the **RWAV “Rural Health Careers Promotion” Grant Application Guidelines 2019** if I am successful in obtaining a grant to attend this course.

I acknowledge that information collected in this grant application may be used in accordance with RWAV’s Privacy Policy and consent to it being used or disclosed for the purposes described in the Privacy Policy

Thank you for your application.