

Bendigo Rural Experience Day Out

Grant Application Form 2019

Applications open at **9:00 am** Monday 3 June 2019 and close Wednesday 26 June 2019 at **5:00 pm**. *Late applications will not be considered*.

Please ensure that you have read the **RWAV "Bendigo Rural Experience Day Out" Grant Application Guidelines** before completing your application form and if you have any questions regarding the selection process, please contact the Future Workforce Program Officer on FutureWorkforce@rwav.com.au.

To apply complete this application form and return to:

Email: <u>FutureWorkforce@rwav.com.au</u>

Personal details

1.

First name:	Surname:
Postal address:	Town:
Postcode:	Phone:
University email:	Personal email:
2. Current course details	
University:	Campus:
Course:	Year of course
Expected year of completion:	
Are you a bonded medical student? 🗌 Yes	🗌 No
Which student Rural Health Club are you a member of?	
Are you available to attend the full day on Wednesday 3 July 2019?	
Yes No	



3. Responses

What do you hope to gain in attending the "Bendigo Rural Experience Day Out" in 2019? (250 words)

Are you a student with a rural background? Please provide details including residential address and time frames.

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 Modified Monash Model MM 2-7.

Have you completed any clinical placements as part of your current course? If yes, Please provide details.

Are you planning to complete clinical placements in a rural (MM2-7) location during your training? Information found at http://www.doctorconnect.gov.au/. Please provide details.

Do you have any dietary requirements?



4. Agreement

Name of applicant:

Date:

In submitting this application form, I agree that I understand and will follow the conditions of grants as outlined in this document and the **RWAV "Bendigo Rural Experience Day Out" Grant Application Guidelines 2019** if I am successful in obtaining a grant.

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

Sign here (digital signature acceptable)

Thank you for your application.