PHIRST  
(Population Health Investing in Research Students’ Training)  
HIGHER DEGREE BY RESEARCH FUNDING SCHEME  
APPLICATION FORM

Closing date for ROUND 1 Applications: Friday 20th April 2012  
Closing date for ROUND 2 Applications: Friday 12th October, 2012

Applicant Details (please print clearly)

Title:  Surname:  Given Name(s)

Address for Correspondence:  Suburb:  State:  Post Code:

Phone:  (Home)  (Work)  (Mobile)

Student Email Address:

Student Number:  

Research Higher Degree Course Details

Please indicate which Research Higher Degree Course you are currently enrolled in:

☐ Doctor of Philosophy  ☐ Master of Philosophy (MPhil)

Thesis title (or research topic):  

Month and Year Candidature commenced:  

Expected thesis submission date:  

Enrolment load:  ☐ Full-time  ☐ Part-time

Employment status:  ☐ Waged  ☐ Unwaged  ☐ Scholarship holder

Please indicate any scholarship/studentships which you have received while enrolled in this course  

Name of Principal Supervisor:  

Centre:  

Ethics Approval

☐ In preparation  ☐ Pending  ☐ Approved (please provide evidence of approval)  ☐ Other:  

________________________________  ___________________________________  __________________________
Purpose of the Application

What is the main purpose of this application (tick one that applies):

- [ ] Attendance and presentation at a conference
- [ ] Equipment and supplies
- [ ] Fieldwork expenses
- [ ] Other (please specify): ____________________________________________________________________

Briefly summarise what you are seeking support for (max 300 words)

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

If your application is successful, how do you anticipate this funding will benefit your research project?

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Budget

Do you have access to any external/other sources of funding for the research degree that are the subject of this application?  
[ ] Yes  [ ] No

If YES, please specify the type and amount of funding available: ____________________________________________________________________

Provide a budget of the expenses you are applying for in the table below:

<table>
<thead>
<tr>
<th>Costs</th>
<th>Total cost</th>
<th>Amount received from other sources</th>
<th>Amount requested in this application</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conference registration</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Accommodation</td>
<td></td>
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<tr>
<td>Travel</td>
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<tr>
<td>Equipment</td>
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<tr>
<td>Other (specify)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL COSTS</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please ATTACH detailed justification for each of the items requested in this table, and information on any amounts received.
Have you requested funding for any of these expenses from another source, where the decision is pending?  □ Yes  □ No

If YES please state source: ________________________________________________________________

When do you expect to know the outcome? ________________________________________________

Attachments

Please indicate which of the following are relevant to your application (you **MUST** attach supporting documentation)

☐ conference details, including registration and accommodation costs (eg. registration form, etc)
☐ written quotation for cheapest airfare/mode of transport
☐ copy of abstract submitted to conference
☐ confirmation of acceptance of abstract (if received)
☐ copies of letter or invitation to visit
☐ quotations for equipment etc
☐ other relevant documents (please specify)

Previous Sources of Funding

Please detail ALL previous and current sources of funding or other types of support you have received during your candidature (include dates, amounts and details of source):

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

How does this application differ from previously funded applications?

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Supervisor Endorsement

To be completed by the Principal Supervisor:

I support this application:

Name of Principal Supervisor (Please Print): ________________________________________________

Signature: ___________________________ Date: ___________________________

Centre/Unit/Location: ___________________________
I have read the Melbourne School of Population Health Higher Degree by Research Funding Scheme (PHIRST) Guidelines, and understand that application for funding under the PHIRST grant scheme is competitive, the amount awarded may be less than the amount applied for, and applications for funding outside the guidelines, or in the opinion of the Higher Degree Research Training Committee I do not satisfy the guidelines, and are not endorsed by the principal supervisor, will not be considered. I also understand I will have to supply receipts or other evidence of spending and, if I am awarded funding under this scheme I must use the funds within 12 months of their being awarded and submit a written report within 6 months of expending the funds awarded.

Name of Applicant (Please Print): ________________________________________________
Signature: ____________________________ Date: ____________________________

Please return your completed application form and all supporting documentation to:

Academic Programs Office
Melbourne School of Population Health
Level 4, 207 Bouverie Street
The University of Melbourne
Victoria 3010.

The University’s Privacy Policy can be viewed at:
This website provides detailed information about the contact details, complaints procedures and other aspects of the University's privacy regime.

Please note CLOSING DATES for applications:

Closing date for ROUND 1 Applications: Friday 20th April 2012
Closing date for ROUND 2 Applications: Friday 12th October, 2012

APPLICATIONS WITHOUT YOUR PRINCIPAL SUPERVISOR’S SUPPORT OR LATE APPLICATIONS WILL NOT BE CONSIDERED