

DRH
Rural Summer Project
Application Form

20 January – 14 February 2020

Closing date for applications COB Friday 6th December 2019

1	STUDENT DETAILS		
	Title: (ie Mr/Miss/Ms/Mrs)		
	First Name:		
	Surname:		
	Student ID:		
	Citizenship Status:	<input type="checkbox"/> Australian citizen	<input type="checkbox"/> Permanent resident
	<input type="checkbox"/> Other (please specify)		
2	CONTACT DETAILS		
	Address		
	Email		
	Telephone	(H/W)	Mobile
3	DATE OF BIRTH		
4	CURRENT PROGRAM (must have completed 2 years of course or enrolled in Graduate entry course at time scholarship commences to be eligible)		
	Program Name:		
	Current Year:		
	University:		
5	LIST OF COMMUNITY DEVELOPMENT PROJECTS AVAILABLE (The UDRH reserves the right of project allocation. There will be no guarantee that you will be allocated your nominated project)		
	Please rank in order of preference from 1 to 4 (with 1 being your most preferred and 4 being your least preferred)		
		Development of youth friendly resource looking at the relationship between physical health and wellbeing	An overview of the existing Aboriginal health and wellbeing programmes that are offer by the agencies in the Eyre Peninsula region
		Meeting the sensory needs of pupils	Reviewing business documents and previous activities in collaboration with the Whyalla Youth Advisory Committee (YAC) to redevelop strategic directions

6	PREVIOUS COMMUNITY ENGAGEMENT EXPERIENCE/INTEREST		
	List any previous community engagement / project experience below:		
	<p>Briefly describe why you want to undertake a Community Development Summer Scholarship and outline any future plans for working with communities or in regional South Australia (if any)</p>		
7	HAVE YOU PREVIOUSLY HELD A STUDENT VACATION SCHOLARSHIP? (tick box)		
	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Type
8	ATTACH A COPY OF YOUR ACADEMIC TRANSCRIPT <input type="checkbox"/>		
9	REFEREE		
	Name:	Phone:	
	Email:		
10	STUDENT SIGNATURE	DATE	
11	FORWARD APPLICATIONS TO:		
	DRH, University of South Australia, Whyalla Campus 111 Nicolson Avenue, Whyalla Norrie SA 5608 OR Email: DRHstudents@unisa.edu.au		
12	CHECKLIST		
	Applicant should include: (tick box) <input type="checkbox"/> Application form <input type="checkbox"/> Referee <input type="checkbox"/> Copy of Academic Transcript		

For further information please contact:

Michael Watkins

Lecturer: Aboriginal Allied Health, University of South Australia, Department of Rural Health
P: 8302 6163 | E: Michael.Watkins@unisa.edu.au

OR

Jessica Muller

Lecturer: Occupational Therapy, University of South Australia, Department of Rural Health
P: 8647 8174 | E: Jessica.Muller@unisa.edu.au

For Office Use only:

	Initials	Date	Time
Application Received			
Certification Received			