

# Application for Completion Scholarship

For research degree students

**i** This form is to be completed by research degree students who wish to apply for a completion scholarship. Before completing this form please check eligibility criteria and additional information on the completion scholarship at: <https://www.unisa.edu.au/research/Research-degrees/Scholarships/For-Current-Research-Degree-Students/completion-scholarships/>

## PART 1: PERSONAL DETAILS

Student ID	<input type="text"/>
First Name	<input type="text"/>
Family Name	<input type="text"/>
Program	<input type="text"/>
International Student	<input type="checkbox"/> Yes <input type="checkbox"/> No

## PART 2: SCHOLARSHIP DETAILS

Have you received a scholarship with a living allowance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please indicate type:	<input type="checkbox"/> RTPd <input type="checkbox"/> USAPA <input type="checkbox"/> RTPi <input type="checkbox"/> UPS <input type="checkbox"/> Other: _____
Living allowance scholarship end date:	<input type="text"/>

## PART 3: ELIGIBILITY DETAILS

Are you currently enrolled? (If unsure please check myUniSA)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you completed your data collection or equivalent?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you in the writing up stage?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you within candidature (not overtime)?	<input type="checkbox"/> Yes <input type="checkbox"/> No Candidature end date: _____
Are you a continuing UniSA academic staff member?	<input type="checkbox"/> Yes <input type="checkbox"/> No

## PART 4: COMPLETION SCHOLARSHIP DETAILS

<input type="checkbox"/> 3 Months <input type="checkbox"/> 4 Months <input type="checkbox"/> 5 Months <input type="checkbox"/> 6 Months
Completion scholarship commencement date: <input type="text"/>

## PART 5: SUPPORTING INFORMATION

Student	<input type="checkbox"/> Attachment 1: Statement addressing the criteria <i>(including a detailed work plan and evidence that time release from paid employment is available)</i> <input type="checkbox"/> Other <i>(please specify)</i> : _____
Principal Supervisor	<input type="checkbox"/> Attachment 2: Statement of assessment and/or support
Dean of Research	<input type="checkbox"/> Attachment 3: Comments and recommendation

**ATTACHMENT 1: STUDENT STATEMENT**

*Please provide responses to all of the below questions. Please attach a separate sheet should space be required.*

Provide a detailed work plan of activities to complete within the period of the completion scholarship funding.

How have you demonstrated the ability to meet deadlines during your candidature? Provide examples

Do you intend to publish as a result of the thesis?

Yes

No

Have you or will you publish with your Principal Supervisor as a result of the thesis? Provide details

Provide details of your employment (if applicable), including the name and contact details of your line manager

Have you discussed potential examiners for the thesis with your supervisor?

Yes

No

Intended thesis submission date:

Any other information you wish to provide:

I acknowledge that I will be required to remain enrolled for the duration of the Completion Scholarship and that I am required to make satisfactory progress otherwise the scholarship may be terminated. I certify that all details on this form are correct.

Student Signature

Date:

**ATTACHMENT 2: PRINCIPAL SUPERVISOR STATEMENT**

*Please provide responses to all of the below questions. Please attach a separate sheet should space be required.*

Are you confident that the student will complete the thesis during the nominated timeframe? Provide details

Please verify the detailed work plan of activities provided by the student and attached to the application

Has the student demonstrated the ability to meet deadlines throughout their candidature? Provide details

Does the student intend to publish as a result of the thesis?  Yes  No

Have you or will you publish with the student as a result of the thesis? Provide details

Does your workload enable to you provide the necessary support to the student during the duration of the scholarship? Provide details

Will the student require additional support during the duration of the scholarship? Have resources indicated in the Statement of Minimum Resources been identified (e.g. office space, computer equipment)? Provide details

Are there any reasons why you think the student will NOT meet their objectives for the duration of the scholarship?

Have you identified potential examiners for the thesis and discussed these with the student?  Yes  No

Have you approached the potential examiners?  
If no, when do you anticipate doing so? \_\_\_\_\_  Yes  No

Has the Nomination of Examiners been submitted and approved?  Yes  No

Principal Supervisor Name

Principal Supervisor  
Signature

Date:

**ATTACHMENT 3 DEAN: RESEARCH ASSESSMENT AND/OR SUPPORT**

Do you support the student's application for a completion scholarship? Please provide assessment and/or comments

*Please attach a sheet should space be required*

Dean of Research Name			
Dean of Research Signature		Date:	

Note: Escalations to go to Dean of Graduate Studies