



**Sydney Medical School**

**Dr Albert S McKern Travelling Research Scholarship**

**Application form for Semester 1 2012**

**(Note: this scholarship is only available to graduates of University of Sydney, University of Edinburgh (Scotland) and Yale University (USA))**

**Discipline of Obstetrics, Gynaecology and Neonatology**

**Closing date: 28 October 2011**

**Late applications will not be accepted.**

**Please submit two sets of the completed application and attachments to:**

**Clinical Professor Jon Hyett, Joint Head – Discipline of Obstetrics, Gynaecology & Neonatology,  
University of Sydney, Royal Prince Alfred Hospital, RPA Mothers & Babies, Missenden Road,  
Camperdown NSW 2050**

**1. Personal details**

|                  |              |                             |             |
|------------------|--------------|-----------------------------|-------------|
| Family Name:     | Other Names: | Title:                      | Student No: |
| Contact Address: |              | Contact Telephone Number/s: |             |
|                  |              | Email:                      |             |

**2. Please complete (a) or (b)**

**a) Current enrolment details**

|  |  |   |
|--|--|---|
| Department / School:   | Degree:<br>PhD or Masters by<br>research | Attendance:<br>Full-time or Part-<br>time |
| Number of full-time equivalent (FTE) semester/s you have enrolled in this course (including any upgrade from a Masters by research to PhD) at the closing date applications:<br><br>_____ FTE semester/s since _____ (month and year). |  |   |
| Name of your Supervisor:   |  |   |

**b) Current position details:**

|                    |        |                        |
|--------------------|--------|------------------------|
| Department/School: | Title: | Full-time or Part-time |
|--------------------|--------|------------------------|

**3. Scholarship/s currently held**

|   |                                     |                 |
|---|-------------------------------------|-----------------|
| Name of Award (list all scholarships currently held): | Commenced from:<br>(month and year) | Value of Award: |
|---|-------------------------------------|-----------------|

**4. Funding sought:** Please attach a budget including quotes indicating the total amount requested and a breakdown via category such as travel, accommodation, etc.

|   |         |
|---|---------|
| Please insert amounts per category here (additional information to be provided in attachment) | Amount: |
|---|---------|

**5. Have you previously received a Dr Albert S McKern Travelling Research Scholarship?**

\_\_\_\_\_

If the answer to the above is "Yes" please provide details

\_\_\_\_\_

**6. Achievement related to Research (if any):** Please attach a 2 page CV summarising research experience and achievements.

List details of any prizes, seminars, conference presentations/posters, publications (state whether published, in press or submitted only) and internal reports that have resulted from your research to date? Attach a separate sheet if required.

**7. Supervisor's Support (Student)**

I support the application for funds by the applicant who is undertaking a PhD/Masters by research degree under my supervision. *(Additional comments should be made on a separate sheet and attached to the application.)*

Signature of Supervisor: ..... Date: .....

**8. Head of Department Support (all applications other than Student)**

I support the application for funds by the applicant who is undertaking investigations into the cause, prevention and treatment of mental and physical pain and distress during pregnancy, labour and puerperium.

Signature of Head of Department ..... Date .....

**9. Applicant's signature**

I have carefully read and checked the eligibility criteria and agree to abide by the *Terms and Conditions*. I declare that the information provided by me on this application form and supporting documentation is complete, true and correct.

Signature of Applicant: ..... Date: .....