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| **School of Music**  **HDR Student Application for Scholarship Support** | **Logo  Description automatically generated** |

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| **Student Number** |  | **Full Name** |  |
| **HDR Program** |  | **Principal Advisor** |  |
| **Full or Part Time** |  | **Scholarship(s)** |  |

***Q1. What scholarship are you applying for?*** (tick one)

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| --- | --- |
|  | **HDR Student School of Music Scholarship** |
|  | **R.D. Kitchen Scholarship** |
|  | **Nancy Jones Travelling Scholarship** |

***Q2. What research activities will be supported by this scholarship?*** (tick all that apply)

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| --- | --- |
|  | Presenting at a conference |
|  | Attending a conference |
|  | Travelling to collect data or meet with stakeholders |
|  | Enrolling in research training courses (for example, software training courses) |
|  | Obtaining research-related services (for example, employing statistical consultants) |
|  | Obtaining performance-related services (for example, employing sessional musicians) |

***Q3. Describe the research activities that will be supported by this scholarship***(maximum 1,000 words)

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***Q4. What is your proposed budget for these activities?*** (insert additional rows as required)

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| --- | --- | --- |
| Expense Type | Scholarship Funding Required (AUD) | Personal Funding Required (AUD) |
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|  |  |  |
| **TOTAL FUNDING REQUIRED** |  |  |

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| *I have checked the conditions of any scholarships I already hold and certify that my request is consistent with any applicable conditions.* | | | | | | |
| **Candidate** |  |  |  |  |  |  |
|  | **Name and Title** |  | **Signature** |  | **Date** |  |

***HDR Principal Advisor Section***

***Q5. Provide a supporting statement addressing the merits of this application***(maximum 1,000 words)

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| *I endorse the candidate’s application. I certify that the research activities outlined by the candidate form part of the agreed program of study and research, and will assist the candidate in the timely completion of their next milestone.* | | | | | | |
| **Principal Advisor** |  |  |  |  |  |  |
|  | **Name and Title** |  | **Signature** |  | **Date** |  |

Please email your complete and fully endorsed form to [music@uq.edu.au](mailto:music@uq.edu.au) for processing.

***Administration Section***

|  |  |
| --- | --- |
|  | Student meets eligibility conditions for scholarship |

|  |  |
| --- | --- |
| Maximum funding allowed |  |
| Amount previously claimed |  |
| Funding remaining |  |
| Funding to be provided |  |