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| **Baillieu Research Scholarship**  **Application for HDR Candidates** | |  |
| **1. Candidate Details** | | |

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| --- | --- | --- | --- |
| Family Name |  | Given Names |  |
| UQ Student Number |  |  |
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| **2. Funding request details and justification** |

Please provide the details of the requested funding, including purpose and benefits to your research and professional development (max 350 words).

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| **2a. Funding request details (Travel)** |

If you funding request relates to travel or an activity, please complete the below details:

|  |  |  |  |
| --- | --- | --- | --- |
| Expected Start Date: |  | Expected End Date: |  |

What activities will you undertake?

| Activity | **Organisation/**  **Institution** | Country | **Duration** | |
| --- | --- | --- | --- | --- |
| **From** | **To** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

\*add more rows if required

|  |  |
| --- | --- |
|  | I have checked that I am able to obtain a visa to the countries which I propose to travel to (if applicable) |
|  | I acknowledge that I must follow the [travel process outlined for UQ HDR students](https://cdf.graduate-school.uq.edu.au/hdr-travel) and familiar with the UQ [travel insurance](https://governance-risk.uq.edu.au/) process. Questions about travel insurance can be directed to your enrolling unit, or to the UQ Travel Insurance Office. |

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| **3. Total Amount Requested** |

|  |  |
| --- | --- |
| Funding requested $ |  |

Please list any other funding you have received or applied for, for this activity/travel:

|  |  |  |
| --- | --- | --- |
| Funding source (travel grant etc) | Status of funding (Applied/Received) | Amount |
|  |  |  |
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Please ensure you read the following information, in addition to the eligibility requirements and terms and conditions for the scholarship, before signing below.

* This form must be endorsed by your Principal Supervisor before submission.

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| ***Candidate Section – PLEASE READ CAREFULLY:***   * *I confirm that I have included all relevant required documentation, including a completed budget spreadsheet, and other supporting documentation, such as letters of invitation, evidence of acceptance of abstract, quotes, etc* * *I agree to comply with the scholarship terms and conditions as outlined in the* [*Rules*](https://scholarships.uq.edu.au/scholarship/hdr-philanthropic-travel-scholarships)*,* [*Schedule A Postgraduate Research Scholarships*](https://scholarships.uq.edu.au/sites/default/files/2021-12/Schedule%20A%20Postgraduate%20Research%20Scholarships.pdf)*, and* [*UQ and RTP Research Scholarships policy*](https://ppl.app.uq.edu.au/content/4.80.01-uq-and-rtp-research-scholarships) * *If my application includes travel, I understand that this application is not for an approval for travel and it is my responsibility to follow the travel process and advice outlined on the* [*HDR Travel page*](https://cdf.graduate-school.uq.edu.au/hdr-travel)*.* * *I agree to repay to the University any unused funds and any funds that the University deems were not used for the purposes approved by the UQ Graduate School.* * *I understand that if I submit an incomplete application, it will be deemed ineligible and will be removed from the round. I understand the Graduate School will not follow up with me regarding an incomplete application.* * *I understand the decision of the selection committee is final and no further correspondence will be entered into.* * *I have checked the conditions of any scholarships I hold and certify that my request is consistent with any applicable conditions.* * *I have read the Privacy Statement detailed below and certify that I have completed this form and the budget truthfully, correctly, and completely.* | | | | | | |
|  | | | | | | |
| **Candidate** |  |  |  |  |  |  |
|  | **Name and Title** |  | **Signature** |  | **Date** |  |
| ***Principal Supervisor Section:***  *I endorse the candidate’s application and if applicable, confirm that I have agreed for the candidate to undertake the proposed activity / travel to the abovementioned location/s on the specified dates. I agree that any and all changes to these plans must be approved by the Graduate School in advance of changes being made.* | | | | | | |
| **Principal Supervisor** |  |  |  |  |  |  |
|  | **Name and Title** |  | **Signature** |  | **Date** |  |
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| **Privacy Statement**  The information on this form is collected for the purpose of assessing your application for a travel scholarship. Information on this form may be disclosed to relevant bodies or donors for the assessment or verification of the claims made in this application. Otherwise the information you provide will not be disclosed to a third party without your consent, unless disclosure is authorised or required by law. For further information please consult the UQ [Privacy Management Policy](https://ppl.app.uq.edu.au/content/1.60.02-privacy-management). |