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| **Applications close: 5.00pm AEST, Monday 2 May 2022**  Applications are to be submitted by your **Institution’s Research Administration Office** as one document in PDF format with the naming convention of:  **“Surname\_Firstname\_PhD Top up.pdf”** to [travelgrants@jdrf.org.au](mailto:chuewe@jdrf.org.au) |

**Formatting**

* + All applications for funding **must** be submitted using the following application form
  + All text is to be a minimum of size 10 Arial font with borders no less than 2cm on each side, top and bottom. Pages must be A4. Do not alter the formatting of the pro-forma document. All text boxes may be expanded but must comply with any indicated page limits.
  + Applicants are to enter their name in the Footer as per the naming convention – ‘*Applicant Last Name, First Name’,* and retain all page numbering.
  + All fields must be complete – enter ‘N/A’ if not applicable.
  + Application must be submitted as a single unlocked PDF.

JDRF Australia may decline applications that do not meet any of the above requirements. Incomplete applications will NOT be accepted without prior discussion with JDRF staff. For any further information, please email the Sonya Luu on [travelgrants@jdrf.org.au](mailto:chuewe@jdrf.org.au) or by phone **(02) 8364 0243.**

***\*\*Please do not include the above instruction pages within the submission\*\****

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| |  |  |  |  | | --- | --- | --- | --- | | 1. **DETAILS SUMMARY** | | | | | **Applicant Details** | | | | | Name and title: |  | | | | Institution: |  | | | | E-mail: |  | | | | Contact number: |  | | | | Where did you hear about the PhD Top-up Scholarship? |  | | | | Please indicate any funding awarded by JDRF: |  | | | | **Eligibility** | | | | | Country and residency status: |  | | | | PhD start date: |  | | | | Date PhD is to be conferred: |  | | | | Are you currently in receipt of any top-up funding? | *(Yes/No – if yes please provide details)* | | | | **Honours Thesis** | | | | | Title of honours/masters thesis: |  | | | | Name of Supervisor: |  | | | | Name of Institution: |  | | | | **PhD Scholarship** | | | | | Type of PhD Scholarship accepted: | *(RTP/NHMRC/University funded etc.)* | FTE (full-time/part-time): |  | | Scholarship Start Date: |  | Scholarship End Date: |  | |  |  | | | | **Administering Institution Details** | | | | | Name of Institution: |  | | | | Postal address of institution: |  | | | | **Research Administration Office Contact** | | | | | Name and title: |  | | | | Position: |  | | | | E-mail: |  | | | | Contact number: |  | | |  |  |  |  |  | | --- | --- | --- | --- | | 1. **APPLICANT SUMMARY** | | | | | **Academic Performance** | | | | | Provide a brief summary of your undergraduate academic focus, highlighting any significant academic achievements ***(maximum 200 words).*** | | | | |  | | | | | **Previous Experience** | | | | | Provide a brief summary of your past work performed in research setting and explain how this is relevant to the field of type 1 diabetes ***(maximum 200 words).*** | | | | |  | | | | | **PhD Project** | | | | | Provide a lay description of your PhD project, including the aims, hypotheses and relevance to type 1 diabetes. Highlight any personal input you had in developing this project ***(maximum 500 words)*.** | | | | |  | | | | | **Type 1 Diabetes** | | | | | Why do you want to pursue research in type 1 diabetes? ***(maximum 250 words).*** | | | | |  | | | | | **Research environment and support** | | | | | Describeyour intended training program including how your supervisor and institute will support you, the resources, facilities, collaborations and intended conference attendance ***(maximum 300 words)*** | | | | |  | | | | | **Career Pathway** | | | | | Describe your intended research focus and career pathway after the completion of your PhD ***(250 word limit).*** | | | | |  | | | | | **Referees** | | | | | Please provide the names of two referees with supporting letters of recommendation. Letters of recommendation should be sent to [travelgrants@jdrf.org.au](mailto:travelgrants@jdrf.org.au) directly by the referee to maintain confidentiality**. It is the applicant’s responsibility to ensure that these letters are sent by the deadline.**   * + **NB:** At least one Referee must be a current supervisor | | | | | Name (Referee 1): |  | Name (Referee 2): |  | | Institution: |  | Institution: |  | | Contact number: |  | Contact number: |  | | E-mail address: |  | E-mail address: |  | | Report sent (yes/no): |  | Report sent (yes/no): |  |  |  | | --- | | 1. **LETTER CONFIRMING OFFER OF A PHD SCHOLARSHIP** | | Include a letter confirming your offer of a Research Training Program Stipend (formerly Australian Postgraduate Award), NHMRC Postgraduate Award or a University-funded PhD scholarship below. |   *(Insert here)*   |  | | --- | | 1. **CURRICULUM VITAE** | | Please include your CV as per the categories below: ***Do not exceed 4 pages.*** | | **Academic and Technical Qualifications - Please include any qualifications in descending chronological order** | |  | | **Career Summary – Please include any relevant experience and expertise in descending chronological order** | |  | | **Awards and achievements – Please include any relevant awards and/or achievements in descending chronological order** | |  | | **Research Publications – Choose the 3 most important and relevant peer-reviewed publications within the past 3 years (in order of merit) with a short paragraph indicating their importance.** | | *(N/A if not applicable)* | | **Grants and funding – Please indicate any awarded grants including the funding body and amount funded if applicable** | | *(N/A if not applicable)* |  |  | | --- | | 1. **ACADEMIC TRANSCRIPT** | | Insert a certified copy of your academic transcript below. |   *(Insert here)*   |  | | --- | | 1. **CERTIFICATION** | | **Applicant certification**  I certify that I understand all requirements of me and that the information I have provided is true and correct.  Name: ………………………………………………….. Date: ……………………….  Signature: ………………………………………………………………………………. | | **Institutional Research Administration Office certification**  I certify that the Administering Institution supports this application and that all institutional requirements have been satisfied.  Name: ………………………………………………….. Date: ……………………….  Position: ………………………………………………..  Signature: ………………………………………………………………………………. | |