# AusCP-CTN PhD Top-Up Scholarships 2018

## Application Form

### Administrative summary

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| **Applicant Details:** | **First Name** | Click here to enter text. |
| **Last Name** | Click here to enter text |
| **Student ID** | Click here to enter text |
| **University / Institution** | Click here to enter text |
| **Department** | Click here to enter text |
| **Contact Number** | Click here to enter text |
| **Contact Email** | Click here to enter text |

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| **Candidature Details:** | **PhD Candidature (full time; part time)** | Click here to enter text |
| **Source of main PhD Funding (if any)** | Click here to enter text |
| **AusCP-CTN Participating Organisation** | Click here to enter text |
| **Principal Supervisor** | Click here to enter text |
| **Principal Supervisor’s Contact Number and Email** | Click here to enter text |
| **Candidature Start Date** | Click here to enter text |
| **Proposed Candidature End Date** | Click here to enter text |
| **Candidature Confirmed (Y/N)** | Click here to enter text |
| **Candidature Confirmation Date** | Click here to enter text |

### Application summary

**1.1 Title of Project** *(Maximum 20 words)*

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| Click here to enter text |

**1.2 Summary of Project – aim, significance, objectives** *(Maximum 250 words)*

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| Click here to enter text |

*Note: AusCP-CTN may use this information for communication purposes, upon agreement by all involved parties.*

**1.3 AusCP-CTN Themes**

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| **Please select all that are applicable to the project outlined in this application:** | Pre-clinical & Neuroprotection  Early Detection & Neuroimaging  Clinical Trials  Knowledge Transfer & Implementation  Engagement & Health Policy |

### Project Details

**2.1 Project Outline**

Provide a description of your PhD project, including the aims, research questions, proposed timelines, methodology, and describe the significance of the outcomes and relevance to cerebral palsy. Highlight any personal input you had in developing this project. *(500 word limit).*

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| Click here to enter text |

**2.2 Relevance to AusCP-CTN**

Outline the relevance of the project to the research themes identified by AusCP-CTN, and how its outcomes will incorporate the AusCP-CTN core values and objectives of creating new knowledge to improve early detection and determine the best interventions and treatments for children with cerebral palsy. *(500 word limit).*

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| Click here to enter text |

### Academic and Track Record

**3.1 Academic Qualifications** *–* Qualification, Institution, Year Awarded.

*Please attach a copy of your academic transcript.*

*Please attach a copy of your current curriculum vitae.*

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| Click here to enter text |

**3.2 Postgraduate Work Experience**

Provide a brief summary of any past work experience in a research setting and explain how this is relevant to the field of cerebral palsy. *(200 word limit).*

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| Click here to enter text |

**3.3 Publications**

Please provide the full reference for all publications; number publications chronologically, listing the most recent publication first.

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| Click here to enter text |

**3.4 Other Relevant Information**

Please provide details of any other contributions you feel are relevant to this application. *(200 word limit).*

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| Click here to enter text |

### Submission checklist

All sections of the application template have been completed.

Application endorsement sign-offs obtained from applicant and Principal Supervisor.

Attachment of applicant’s current curriculum vitae.

Attachment of applicant’s certified academic transcript.

## CERTIFICATION

*All the details in this application are true and complete. All parties identified in the application have agreed to its submission.*

*By submitting this application, I agree to abide by the conditions of the AusCP-CTN for this PhD Top-Up Scholarship. I give my consent to AusCP-CTN to use this project application summary for communication purposes, upon agreement by all involved parties, and for profiling in the AusCP-CTN Project Database.*

*Note: Approvals by email are acceptable, however must be provided with the submission as a part of the compiled PDF.*

**Endorsement from Applicant and Applicant’s Principal Supervisor**

*I have read and endorse this Application, including where relevant, acknowledging any contributions and relevant resource commitments and the nature of their intended roles and responsibilities from my organisation as detailed in this Application.*

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| **Applicant** | **Title, Full Name** | **Click here to enter text** |
| **Date** | **Click here to enter text** |
| **Signature** |  |
| **Applicant’s Principal**  **Supervisor** | **Title, Full Name** | **Click here to enter text** |
| **Date** | **Click here to enter text** |
| **Signature** |  |