

APPLICATION FOR A COMPETITIVE AWARDS PROGRAM

19.07a

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Grounds for considering it will require the **period** sought:

Information about your recent relevant work:

Your view of the **benefits and outcomes** of your undertaking this program:

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SUPERVISOR TO COMPLETE:

Briefly state the arrangements which will be made to cover the applicant's duties:

Comment on the worth of this project, expected outcomes and benefits to the University, and the appropriateness of the period sought:

Supervisor's Signature: _____

____/____/____
Date

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HEAD OF DIVISION/OFFICE TO COMPLETE

Please provide your comments on the information supplied by the supervisor and indicate the degree of your support for this application:

Head of Division/Office

___ / ___ / ___
Date

If this application is successful, claims for entitlements will be dealt with by the Personnel Office.

Details of any financial assistance from other sources, whether or not such financial assistance includes a travel grant (each amount to be shown in Australian dollars). No other University funds (either recurrent or special purpose) will be utilised in support of the Program, without the prior approval of the Head of Division/Office:

Financial Assistance Granted

Source of financial assistance	Application of financial assistance	Amount \$
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Financial Assistance Applied for or Projected

Source of financial assistance	Application of financial assistance	Amount \$
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Notes: It is realised that at the time of application for a Competitive Awards Program the details requested in this item may not be complete. Members of staff are asked to bring this information up to date prior to any payment being made.

Details of financial assistance to be received may be submitted direct to the Vice-Chancellor.

Staff Member's Signature: _____

____/____/____

Date