



ABBOT PLACID SPEARRITT MEMORIAL SCHOLARSHIP

Enquiry / Application Form for Scholarship

Applicant Details

Surname		
Given Names		
Address		
Telephone No.	Home:	Mobile:
Email		
Citizenship / Permanent Resident	Australian or Permanent Resident: Yes <input type="checkbox"/> No <input type="checkbox"/> If not, state Nationality:	

Supporting Information

Applications for other Scholarships / Awards	Have you applied for and/or been granted any scholarships or other awards to assist in your study for the period covered by the APSM Scholarship? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide details.
University Education Please list: <ul style="list-style-type: none">• Degree(s) completed• University• Date degree awarded	<i>A copy of the degree and academic record should be attached.</i>

<p>Current University studies:</p> <ul style="list-style-type: none"> • Degree(s) completed • University • Commencement and anticipated completion dates 	<p><i>If you are a Higher Degree Research student, please provide a summary of your thesis topic. If not, please provide a transcript of completed and current subjects.</i></p>
<p>Current and future academic and professional goals. Indicate how this Scholarship will assist you in achieving these goals.</p>	
<p>Language proficiency</p>	<p>English proficiency: First language? Yes <input type="checkbox"/> No <input type="checkbox"/> If not, indicate IELTS level or other recognised test of language proficiency</p> <p>Proficiency in European languages: Language: Please describe level of proficiency especially in reading and writing</p>
<p>Experience in translation of documents, including those from earlier times <i>It is suggested you include a one page document in the original language and your translation of it into English.</i></p>	
<p>Research Experience and Publications <i>Please describe major research areas above, and enclose a list of publications, including refereed papers, reports, etc.</i></p>	

Referees

Please provide the names, positions and contact details of two academic referees who can confirm your competence in the required areas for your research topic.

Completion of the Abbot Placid Spearritt Memorial Scholarship

Topic

Please provide details of the research work you propose to complete. You are advised to contact the Archivist at New Norcia to discuss and refine this prior to completing this application. You may attach one additional A4 page providing more details about the project.

Time Commitment

Will you be available to commence this research project by February of the next year?

Yes No

Will you be able to commit sufficient time to this project, including reports, papers, etc., emanating from it to ensure completion by the following February, bearing in mind your other life commitments?

Yes No

If your desired topic cannot be completed within the above timeframe, please indicate the anticipated completion date and the reason for a longer time period for this research.

<p>Travel to New Norcia</p>	<p>Are you able to visit New Norcia and reside there on occasions that may be needed to complete your research topic?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>What financial assistance do you anticipate needing to fund this travel?</p> <p><i>Please identify any impediments such as other commitments, health, distance, needs of dependents, etc., that may restrict your availability.</i></p>
<p>Financial independence</p>	<p>As the Scholarship provides only modest financial assistance, do you have some additional means of financial support during the research period?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Connection with current degree studies</p>	<p>Do you anticipate including the Scholarship research project as part of your current degree studies?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If Yes, please provide a description of the connection between the two.</p>
<p>Supervisor <i>Please provide name, position, university or institution, and contact information. Note that the ARP reserves the right to appoint the eventual supervisor of the successful applicant.</i></p>	<p>Please nominate at least one academic who has the competence and availability to supervise your Scholarship research project.</p>

Supporting Statement

You are invited to prepare a supporting statement that might provide additional information not noted in your responses to the questions on this Application Form. You may wish to develop the research topic in more detail, or provide further evidence of your suitability to carry out this research competently.

Please ensure the Supporting Statement is no longer than two typed A4 pages.

The completed application with all attachments should be emailed to the Archivist, Peter Hocking, at archives@newnorcia.com.au A hard copy should also be mailed to the Archivist, Benedictine Community of New Norcia, c/o Post Office, New Norcia, WA, 6509 to be received by August 31st 2019.

Signature:

I confirm that the information I have provided in this application and all supporting documents is accurate to the best of my knowledge. I understand that it is my responsibility to check its accuracy and that my application may be rejected and/or the Scholarship withdrawn in the event that inaccuracies are revealed. I confirm I have read and agree to the information in the *Information for Applicants* document.

Signature:

Date: