

Murdoch University wishes to support and reward students with a history of high academic and/or professional achievement. The following merit based scholarships are open to students seeking to enrol, or who are currently enrolled, in an undergraduate, honours or postgraduate degree, subject to meeting the selection criteria. Please visit the website to find the criteria for each of our scholarships prior to completing the form. Please check the website for tips on completing your application form.

## MERIT SCHOLARSHIPS

Please indicate in this section the scholarship(s) you wish to apply for:

### Undergraduate

AJ Parker Memorial	IMO Extractive Metallurgy	Professor ST Leong Memorial
Apiam Animal Health Bursary	Kimberly Rural Health Alliance	Rose and Stan de Pierres
Dean's Scholarship for Education	NTEU Aboriginal & Torres Strait Islander	Tucker Family

### Honours

Banksia Association	Trillion Trees
Calver Family	Myrtle AB Lamb
Harry Butler Institute	Science and Agribusiness Connect

### Postgraduate

Professor ST Leong Memorial

## PERSONAL DETAILS

Given Name: \_\_\_\_\_ Surname: \_\_\_\_\_ TISC ID or Murdoch Student Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Contact Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Degree Title and Major: \_\_\_\_\_ Year of Study: \_\_\_\_\_

Citizenship and/or residency status: \_\_\_\_\_ If you selected other please specify: \_\_\_\_\_

Do you identify as being of **Aboriginal and/or Torres Strait Islander** descent?      Yes      No

Will you be relocating from a **regional or remote area** to commence your studies at Murdoch University?      Yes      No

If you answered yes, please provide documentary evidence with your address stated.

*This may include: Drivers license, high school certificate, official letter with your name and address*



## TERMS AND CONDITIONS

As a successful recipient of a **Murdoch Merit Scholarship**, I agree to the following terms and conditions and understand that it is my responsibility to adhere to the following conditions:

1. I must remain enrolled in a full-time, internal academic program offered by Murdoch University for the full duration of my scholarship, unless granted an exception for exceptional circumstances.
  2. I must seek independent advice from the relevant authorities on the effect, if any, that the scholarship may have on my eligibility for income support; or any tax implications.
  3. I must notify the Student Financial Support Office (SFSO) in writing immediately if I:
    - a. Wish to transfer to another academic program within the University.
    - b. Seek a retrospective withdrawal from any units I have enrolled in.
    - c. Choose to defer my studies and/or apply for Approved Leave.
    - d. Wish to study abroad on a Murdoch University affiliated placement.
  4. I understand that I will forfeit the Scholarship if I:
    - a. Terminate my enrolment.
    - b. Transfer to another institution.
    - c. Transfer from full-time to part-time study (unless I have been granted an exemption).
    - d. Do not maintain Satisfactory Academic Progress (see Academic Monitoring and Progression Policy 4.1.1).
    - e. Fail to provide up to date contact and/or financial details to the SFSO when requested.
  5. I agree and acknowledge that changes in my enrolment may make me ineligible to receive scholarship payments. In the case that I am deemed ineligible I may be placed on a breached status of six months without payment. This status would provide me with the opportunity to improve my grades or study part-time, to then be considered for payments in the following semester. This opportunity would occur only once for the duration of the scholarship, and is at the discretion of the SFSO and the donor.
  6. I understand that continuing to receive payments that I am ineligible for will result in action taken by the university. In the case of receiving ineligible funds, I will be required to repay all ineligible payments to the SFSO within a 3 month period.
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## DECLARATION & ACCEPTANCE

I declare that:

- The information I have provided is true and correct.
- I understand that providing false or misleading information will result in the cancellation of, and repayment of, my scholarship; and that I will be subject to the provisions of the Student Discipline statute.

By ticking and inserting my name in the space provided below, I agree that this constitutes effective execution and agreement to both the terms and conditions, and declaration of this form.

Tick:            Full name:

Date:

*If you have any questions regarding this form, please contact the Student Financial Support Office directly.*