

ANU Medical School

Humanitarian Medical Scholarship

Application Form

The objective of the Humanitarian Medical Scholarship is to provide one postgraduate scholarship at the ANU Medical School to a student who is from a refugee or other disadvantaged background. Funding for this Award has been provided by a community of donors who wish to support a student with refugee status to become a medical doctor.

| Applicant Details | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|
| Given Name/s: | Family Name: |
| | |
| Gender:Date of Birth | :ANU ID: |
| Email: | Mobile: |
| Eligibility and Declaration | |
| I confirm that I meet the below eligibility crite | eria (please tick) |
| I am not an Australian citizen, Aust | ralian permanent resident or permanent humanitarian visa holder. |
| I hold a Temporary Protection Visa, or a Safe Haven Enterprise Visa, or am an Asylum Seeker on Bridging Visa Type A or E and can provide supporting documentation to verify this. | |
| I have been offered a place in the I | Doctor of Medicine and Surgery (8950XMCHD) program for 2023. |
| This application form and supporting visa documentation must be sent to the Medical School Admissions Office via email to admissions.medicalschool@anu.edu.au by 5:00pm AEDT Monday 21 October 2022. | |
| By signing below, I declare that the information in this form and any supporting documentation is true and correct. | |
| Student Name | |
| Student Signature | Date |
| | |