

AMA INDIGENOUS MEDICAL SCHOLARSHIP 2021
APPLICATION FORM



Details marked with an asterisk must be completed

*Last Name	*First Name	Middle Name
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

***Home Address**
Click or tap here to enter text.

*Mobile No.	Home Phone No.
Click or tap here to enter text.	Click or tap here to enter text.

*Email address	*Date of Birth
Click or tap here to enter text.	Click or tap here to enter text.

***University at which studies are being undertaken**
Click or tap here to enter text.

*Title of Course	*Year Commenced	*Current Year of Study
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

***Name of Current Scholarships or Bursaries**
Click or tap here to enter text.

You must declare in full, any scholarships or bursaries you currently hold. Please read the declaration below.


DECLARATION

I declare that the information I have provided is true and correct to the best of my knowledge. I understand that providing false or misleading information, or omitting relevant information, may lead to my application not being considered, or if I am awarded an AMA Indigenous Medical Scholarship it may be suspended, withheld, or terminated, at any time.

*Name of Applicant	*Date
Click or tap here to enter text.	Click or tap to enter a date.

Please attach to this form:

- A brief statement describing your purpose(s) for studying medicine and the uses to which you hope to put your medical training (maximum 500 words);

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- A short *curriculum vitae* and the names and contact details of two referees (maximum two pages);
 - An official letter from an Aboriginal and/or Torres Strait Islander community organisation (to which you are well known) supporting your application as an Aboriginal and/or Torres Strait Islander person;
 - An official transcript or letter from your university confirming your academic results for your first year of medicine, and any subsequent year of medicine completed; and
 - Formal proof of full-time enrolment in a medical course for the 2021 academic year. This must be either an academic transcript or an official letter from the university. **Screen shots will NOT be accepted.**

Please send this completed form and all of the required attachments by 31 January 2021 to:

AMA Indigenous Medical Scholarship
Australian Medical Association
PO Box 6090
KINGSTON ACT 2604

Or via email at: indigenousscholarship@ama.com.au