AUSTRALIAN TELECOMMUNICATIONS AND ELECTRONICS RESEARCH BOARD

1996 POSTGRADUATE SCHOLARSHIP IN TELECOMMUNICATIONS

APPLICATION FORM

pplicant's Surname: Other name(s):

rivate Address: Professional Address:

elephone: telephone:

ontact address: Private / Professional

esident Status : Australian Citizen / Permanent Resident Date of Birth: /

Permanent Resident, Nationality :

egree for which scholarship sought : PhD / Masters Enrollment : full-time / part-time

re you currently studying for this degree : Yes / No If Yes, on what date did you start: /

ealth: Do you have any medical condition which has potential to interfere with progress towards the degree sought? Yes / No If Yes, please attach details.

vailability: State the date on which you will be available to take up the award if successful: /

uture: Without commitment, please state your intentions regarding residence in Australia after completing the degree.

ignature: **Date:**

ETURN APPLICATION TO: The Secretary
ATERB
PO Box 93 Telephone (02) 887 8221
NORTH RYDE NSW 2113 Facsimile (02) 887 2736

CLOSING DATE: 1 NOVEMBER 1995

ame of Host Institution:

upervisor(s): Position/title: Department:

greement obtained? Yes / No Date:

pplicant's Current Academic status:

pplicant's Previous Research Experience :

pplicant's Proposed Research :

o which ATERB Area of Interest is your research relevant? 1 2 3* 4* 5 6 7*

other:

esearch Title:

etails:

NB: Student + Topic + Supervisor will be considered together for the purpose of the scholarship*

LIST OF ATTACHMENTS REQUIRED FOR THE APPLICATION

Official Academic Record or Equivalent

Institution:

Degree: Year:

Reference from your current supervisor(s). (if applicable)

Two references, in addition to any reference from your supervisor.
(References may be sent independently of the application but must arrive by the closing date).

Referee 1: Referee 2:

address: address:

Publication list for the last three years of your proposed supervisor(s).

Applicant's Curriculum Vitae etc.

Applicant's Publication list (if applicable)

If you are enrolled part time for your PhD degree, please give details of the university requirements for your enrolment and list any sources of income.

Relevant health details if you answered YES to the health question: 'Do you have any medical condition which has potential to interfere with progress towards the degree sought?'

ıid you obtain the application form from the WWW: Yes / No

Yes, which format did you use?

/hat type of document processing would you prefer?

CLOSING DATE: 1 NOVEMBER 1995