

**APPLICATION FORM –SCHOOL OF BIOLOGICAL SCIENCES SUMMER SCHOLARSHIP 2016/2017**

| STUDENT DETAILS   |   |          |                           |             |  |
|---|---|----------|---------------------------|-------------|--|
| ID Number   |   | Surname: |                           | First Name: |  |
| Address:  |   |          |                           |             |  |
|   |   |          |                           |             |  |
| Phone No:   |   |          | E-mail:                   |             |  |
| <input type="checkbox"/>  | I have attached my academic transcript to date including course work completed, year of completion and results obtained. <b>(Unofficial Access Adelaide copy is acceptable)</b> |          |                           |             |  |
| <i>Please list a maximum of two laboratories in the School in which you wish to undertake a summer scholarship.</i>   |   |          |                           |             |  |
| SCHOLARSHIP DETAILS   |   |          |                           |             |  |
| <b>Laboratory / supervisor 1:</b>   |   |          |                           |             |  |
| Proposed commencement date:   |   |          | Proposed Completion date: |             |  |
| Supervisor's signature*   |   |          |                           |             |  |
| <b>Laboratory / supervisor 2:</b>   |   |          |                           |             |  |
| Proposed commencement date:   |   |          | Proposed Completion date: |             |  |
| Supervisor's signature*   |   |          |                           |             |  |
| <b><u>For attention of Supervisor*</u></b><br>* I confirm that I have met with the above applicant and discussed the possibility of a School of Biological Sciences summer vacation scholarship in my laboratory. |   |          |                           |             |  |
| Applicant's Signature:  |   |          | Date:                     |             |  |

**Please return the completed form and unofficial academic transcript to:**

Mrs Jennifer Peters  
 School of Biological Sciences  
 Molecular Life Sciences Reception  
 Molecular Life Sciences Building  
 The University of Adelaide  
 Adelaide SA 5005

**List labs in order of preference**

| Order | Lab |
|-------|-----|
| 1     |     |
| 2     |     |

**Deadline by: Friday, 14 October 2016, 4:00pm**

Please indicate what other external scholarships you are applying for:

|           |  |
|-----------|--|
| <b>1.</b> |  |
| <b>2.</b> |  |
| <b>3.</b> |  |