# logo-h-full

# **The A.R. Riddle Grants – Semester 2, 2020**

These grants were founded in memory of the late Mr Arthur R Riddle, and are available to students who are commencing the **last semester** of their Honours or Postgraduate Coursework programs in semester 2, **2020.**

Students **must** be able to establish financial need and provide supporting documentation.

The annual value of the grant varies depending on grant funds and applicant numbers (dependent on merits of application).

Applicants are requested to contact Student Care before submitting an application to make an appointment: Ph: 8313 5430 / email: [studentcare@adelaide.edu.au](mailto:studentcare@adelaide.edu.au) **for a short interview to discuss their application**. Applicants will be required to provide evidence of income and verification of expenses they are requesting assistance with.

International students are not eligible to apply for the AR Riddle Grants however, in exceptional circumstances please contact Student Care.

The application form is downloadable from the University’s website at <http://www.adelaide.edu.au/scholarships>

**Semester 2 - Applications close 5pm, Wednesday 19 August 2020**

****

**The A.R. Riddle Grant – Semester 2, 2020**

# **APPLICATION FORM**

This grant is available to students who can evidence financial need and are enrolled in a completing Honours year or Postgraduate Coursework program at the University of Adelaide.

Please read the attached flyer to ensure you are eligible to apply before completing the application.

**Applications close 5pm, Wednesday 19 August 2020**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal Details** | | | | | | | | | | | | | | |
| **Student ID#** |  |  |  |  |  |  |  | | | **Date of Birth** | |  | | **Male**  **Female** |
| **Title:** | **Family Name:** | | | | | | | | **Given Names:** | | | | | |
| **Semester Postal Address:** | | | | | | | | | | | | | | |
|  | | | | | | | | **State:** | | | | | **Post Code:** | |
| **Semester Phone Number:** | | | | | | | | **Mobile Number:** | | | | | | |
| **Email Address:** | | | | | | | | | | | | | | |
| **Are you:**  An Australian citizen  An Australian Permanent Resident  Other | | | | | | | | | | | | | | |
| Program/department of study (*e.g. Honours/Anthropology*) | | | | | | | | | | | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | |
| **Are you undertaking study as a Commonwealth Supported student?** | | | | | | | | | | | Yes No | | | |
| **Please explain briefly below how this grant would assist you in completing your studies:** | | | | | | | | | | | | | | |

|  |  |
| --- | --- |
| **Financial Information** | |
| **Money or assets in reserve (bank accounts/shares etc) $...........................................** | |
| Income amount per week:  Centrelink Benefit: $...........................................  Scholarship: $...........................................  Parent/Spouse support: $...........................................  Own earnings (per week): $...........................................  Other: $...........................................  (e.g. Child Support payments): | **Living Expenses – Amount per week:**  **Rent: $...........................................**  **Electricity/Gas: $...........................................**  **Telephone: $...........................................**  **Food: $...........................................**  **Transport: $...........................................**  **Entertainment: $...........................................**  **Other (clothes,etc) $...........................................**  **Loan repayments: $...........................................**  **Credit Card: $...........................................** |
| Total: $........................................... | Total: $........................................... |
| **I declare that the information I have supplied on this form is true and correct to the best of my knowledge. I understand that for this application to be processed, Student Care and University staff may have access to my student record. The information supplied will only be used for the selection process of this grant program and will be managed in accordance with the University of Adelaide Privacy Policy and Management Plan available at** <http://www.adelaide.edu.au/policies/62>  Applicant signature: Date: | |

Notes by interviewer

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |