

RESEARCH FELLOWSHIP - APPLICATION FORM

Please read the Guidelines and Conditions before completing this form. Complete the form in 11 point font.

APPLICATIONS CLOSE 8th AUGUST, 2008. LATE APPLICATIONS WILL NOT BE ACCEPTED. Signed applications should be submitted to: Research Services, The Chancellery, University of Newcastle, Callaghan, NSW 2308, AUSTRALIA

1. APPLICANT DETAILS

FAMILY NAME:	GIVEN NAME(S):
DATE OF AWARD OF PHD:	
CURRENT POSITION TITLE:	
CURRENT POSITION INSTITUTION:	
CONTACT ADDRESS:	
CONTACT TELEPHONE No.:	
CONTACT FACSIMILE No.:	
CONTACT EMAIL ADDRESS:	
ABORIGINAL PERSON TORRES STRAIT ISLANDER PERSON (CIRCLE)	

2. HOST CENTRE

CENTRE (delete as appropriate): Centre for Brain and Mental Health Research / Research Centre for Gender, Health and Ageing
HEAD (delete as appropriate): Professor Vaughan Carr / Professor Julie Byles

3. LEVEL OF APPOINTMENT REQUESTED

APPLYING FOR SALARY SUPPORT AT ACADEMIC LEVEL?: _____
Please discuss this with Professor Carr/Professor Byles prior to submission.

