

APPLICATION FOR THE L H KNIGHT MEDICAL EDUCATION TRUST FUND FOR 2009

The L H Knight Medical Education Trust provides financial support to students deserving of financial assistance in the School of Medicine. Students are eligible to apply in all years of the course.

Awards made are for one year in the first instance, but may be renewed in the following year or years, in competition with new applicants. A committee convened by the Dean or his nominee will consider applications.

Applicants for the awards must submit details of their academic records to date, and a comprehensive statement of their financial situation. It will be necessary for an applicant to establish significant financial need before eligibility for assistance can be considered. The University reserves the right to make independent inquiries (for example with the candidates school or college) as to the financial circumstances of the applicant.

Fill in all sections of the form and attach any documents or statements to support your application. Return the application form to the School of Medicine Office, University of Tasmania, Private Bag 68, Hobart TAS 7000.

Email – Admin@med.utas.edu.au

**Application close on 8 May 2009.
Late applications will not be accepted.**

NAME: _____

ADDRESS: _____

TERM ADDRESS (if different from above): _____

EMAIL: _____

CURRENT YEAR OF MEDICAL COURSE: _____

DECLARATION

I declare that, to the best of my knowledge, the details provided by me and contained in this application for funding from the L H Knight Medical Education Trust are true and correct. I understand that I may be required to amplify or provide evidence in support of any statements made in this application.

Signature of Applicant

Date

PART A: INCOME DETAILS

| | | | | |
|----|-----------------------------------------|--------|------------------------|-----------------|
| 1. | AUSTUDY | Yes/No | Amount per week | \$ _____ |
| 2. | SCHOLARSHIP/BURSARY | Yes/No | Amount per week | \$ _____ |
| | Name of Scholarships or Bursaries held: | | | |
| | _____ | | | |
| 3. | CASUAL OR PART-TIME WORK | Yes/No | Amount per week | \$ _____ |
| | Describe positions held: | | (average for 52 weeks) | |
| | _____ | | | |
| | _____ | | | |
| 4. | PARENTAL CONTRIBUTION | Yes/No | Amount per week | \$ _____ |
| | | | (average for 52 weeks) | |
| 5. | INVESTMENT INCOME | Yes/No | Amount per week | \$ _____ |
| | Give details: | | (average for 52 weeks) | |
| | _____ | | | |
| | _____ | | | |
| 6. | OTHER INCOME (give details) | | | |
| | _____ | | | |
| | | | Amount per week | \$ _____ |
| | | | (average for 52 weeks) | |
| | TOTAL INCOME PER WEEK | | | \$ _____ |

PART B: EXPENSES

| | | | | |
|----|-----------------------------------------------------------|--------|------------------------|-----------------|
| 1. | BOARD | | Amount per week | \$ _____ |
| | With parents | Yes/No | (average for 52 weeks) | |
| 2. | RENTAL | | Amount per week | \$ _____ |
| | | | (average for 52 weeks) | |
| | University/College/Student Housing/Other (please specify) | | | |
| | _____ | | | |
| 3. | FOOD | | Amount per week | \$ _____ |
| 4. | SERVICES (HEC, phone etc) | | Amount per week | \$ _____ |
| 5. | TRANSPORT | | Amount per week | \$ _____ |
| | Fares or vehicle expenses. | | (average for 52 weeks) | |
| | TOTAL EXPENSES PER WEEK | | | \$ _____ |

PART C: STATEMENT OF ASSETS

| | | | | | |
|------------------------------------------------------------------------------|---------------------------------------------|--------|--------------------|------------------------------|-----------------|
| 1. | BANK/CREDIT UNION/BUILDING SOCIETY ACCOUNTS | Yes/No | Current balance(s) | \$ _____ | |
| 2. | INVESTMENT ACCOUNTS | Yes/No | Current balance(s) | \$ _____ | |
| Name(s) of Bank(s)/Credit Union(s)/Building Society where accounts are held: | | | | | |
| _____ | | | | | |
| 3. | PROPERTY | Yes/No | Current value | \$ _____ | |
| 4. | MOTOR VEHICLE | Yes/No | Current value | \$ _____ | |
| 5. | OTHER Please specify | | | | |
| _____ | | | | | |
| | | | | Current Value | \$ _____ |
| | | | | TOTAL VALUE OF ASSETS | \$ _____ |

PART D: LIABILITIES

| | | | | | |
|----|------------------------|--------|----------------------|---------------------------------|-----------------|
| 1. | BANK LOAN OR OVERDRAFT | Yes/No | (a) currently owed | \$ _____ | |
| | | | (b) weekly repayment | \$ _____ | |
| 2. | CREDIT CARDS | Yes/No | (a) currently owed | \$ _____ | |
| | | | (b) weekly repayment | \$ _____ | |
| 3. | STUDENT LOAN/MORTGAGE | Yes/No | (a) currently owed | \$ _____ | |
| | | | (b) weekly repayment | \$ _____ | |
| 4. | MOTOR VEHICLE FINANCE | Yes/No | (a) currently owed | \$ _____ | |
| | | | (b) weekly repayment | \$ _____ | |
| 5. | OTHER (please specify) | Yes/No | (a) currently owed | \$ _____ | |
| | _____ | | (b) weekly repayment | \$ _____ | |
| | | | | TOTAL CURRENTLY OWED: | \$ _____ |
| | | | | TOTAL WEEKLY REPAYMENTS: | \$ _____ |

Part E: PERSONAL DETAILS

| | | |
|----|---------------------|-------|
| 1. | FATHER'S OCCUPATION | _____ |
| 2. | MOTHER'S OCCUPATION | _____ |

BROTHERS AND SISTERS STILL SUPPORTED BY YOUR PARENTS

| | | |
|-------|-------|-------------------|
| NAME | AGE | SCHOOL/UNIVERSITY |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

