



MATHEMATICS VACATION SCHOLARSHIP APPLICATION FORM
January — February 2017

Please return the completed form **by Friday 25 November 2016** to: -

Christine Hale (christine.hale@mq.edu.au)
AHH 2.615, Mathematics Dept
Macquarie University NSW 2109

1. Are you enrolled at Macquarie University?

YES NO If YES, please give your Student ID

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Degree being undertaken: _____

In which Faculty:

<input type="checkbox"/> Science and Engineering	<input type="checkbox"/> Business and Economics
<input type="checkbox"/> Arts	<input type="checkbox"/> Human Sciences

2. Personal Details

Title:		Gender:	
<small>(eg Dr, Mr, Mrs, Miss, Ms)</small>			
Family Name:			
First Name (preferred):			
Other Given Names:			

3. Contact Details

Address		Phone/Email	
<i>Line 1</i>		Email:	
<i>Line 2</i>		Mobile:	

Macquarie University students do not need to supply their exam results as we will have these.

The decision will be largely based on your exam results.

Students from other Universities must send an academic transcript of their results so far, as well as a reference from an academic staff member of their University (email to: jim.denier@mq.edu.au).

Students from other Universities will also need to supply a letter from their own University declaring that the student will be covered by that Universities Personal Accident Insurance. This need not be sent at the time of the application but must be received by us before the scholarship is taken up.

Please complete page 2 of this form – overleaf

Please list in order of your preferences, up to 4 projects on which you would like to work.

See: maths.mq.edu.au for a list of 2017 vacation projects on offer.

See: maths.mq.edu.au/research/ for an overview of research carried out in the Department of Mathematics.

(1) _____ (3) _____

(2) _____ (4) _____

Please tell us why you are applying for a vacation scholarship.

REFERREE DETAILS – Please provide contact details for 2 referees who have agreed to send a reference and have them send it to sci.maths-adm@mq.edu.au before 25 November, 2016.

Referee 1:

Name (include title):

Position: _____

Department and Institution:

Telephone: _____

Email: _____

Referee 2:

Name (include title):

Position: _____

Department and Institution:

Telephone: _____

Email: _____

DECLARATION by applicant

I declare that the information provided above is true and authorise Macquarie University to obtain any documentation and/or results referred to for the purpose of this application. I understand that the University reserves the right to vary or reverse any decision made on the basis of incorrect or incomplete information.

Signature: _____

Date: _____