



## The Carmel Baulderstone Memorial Scholarship Supporting Documentation Form

The Carmel Baulderstone Memorial Scholarship is designed to provide assistance to second and third year undergraduate nursing students admitted to the Bachelor of Nursing at Flinders University. The scholarship will provide a contribution towards a living allowance and travel costs for a placement in a College of Nursing and Health Sciences-approved clinical education facility in a rural or remote setting. Up to four scholarships will be made available annually with a combined total value of \$5000.

To be eligible to apply you must be:

- an Australian citizen or hold permanent residency status; and
- enrolled in, or intending to enrol in, a Professional Experience Placement topic in the second or third year of the Bachelor of Nursing (can be a graduate entry student in their final year) at Flinders University; and
- able to demonstrate an interest in and understanding of the health needs of all Australians living in rural and remote areas.

Criteria to be eligible to apply you need to:

- Have a Grade Point Average (GPA) of Credit and above; (as noted on your academic record)
- Complete the questions below

**Applications should be submitted online through the Flinders University Student System by the specified closing date. Applicants will need to login and navigate to the My Scholarships tab to submit an application.** All successful candidates will be required to submit a 500 word report on their placement experience and what they have learnt to be forwarded to the following email - [CoNHSexecsupport@flinders.edu.au](mailto:CoNHSexecsupport@flinders.edu.au) within one month following their placement.

<b>Student ID No:</b>			
<b>Given Name:</b>		<b>Family Name:</b>	
<b>Contact Phone No.:</b>		<b>University Email Address:</b>	

Please describe what particularly interests you about a rural or remote professional experience placement and what you would like to gain from it ? (250 words)

**What professional and personal qualities do you believe you would bring to a rural or remote professional experience placement? (200 words)**

**Given that aboriginal and non-aboriginal Australians living in rural communities often lack access to many health services, please describe how you might adapt to different and challenging clinical environments, and what you understand by the phrase, a “commitment to social accountability” in relation to health care. (250 words)**

**Declarations:**

- I declare that I have read and understood the University’s policy on Police Clearances and Working with Children Clearance and agree to provide the necessary documentation prior to attending a rural or remote placement.
- I declare that I have read and understood the University’s policy on Immunisation and agree to have the necessary immunisations prior to my placement. For these placements the minimum vaccination recommendations for are: Diphtheria/Tetanus, Varicella, Hepatitis B, Influenza, Measles/Mumps/Rubella (for students born during or since 1966), Pertussis (using dTpa) and Hepatitis A.
- I declare that I have read and understood the University’s policy on Fitness for practice and have disclosed any medical, emotional, physical or psychological issue that could affect my ability to undertake clinical practice.
- In some locations a vehicle may be available to assist with travel to and from your accommodation and the clinical training facility. If a vehicle is available, I am able to provide a certified copy of my current Driving Licence prior to attending the rural or remote placement.

I declare that the information I have entered on this application is accurate and correct.

In submitting this application I agree that:

- I can travel independently to the rural or remote location either proposed by me or allocated by the College of Nursing and Health Sciences.
- while day shifts are preferred by the College of Nursing and Health Sciences for student placements, I may be required to attend late and/or weekend shifts during the placement period, depending on the requirements of the clinical training facility.

<b>Signed:</b>		<b>Date:</b>	
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