Edith Cowan UniversityStudent Services Centre - Scholarships



ECU Vice Chancellor's Aboriginal and/or Torres Strait Islander Scholarship Application Form

Student ID	First Name		Surname			
Daytime contact no	, , , , , ,	Course Commencement date	Month/Yea	ır		
Please ensure that your correspondence address details are updated on SIMO						
To confirm your eligibility please complete the following:-						
I identify as:	Australian Aboriginal de	scent; or				
	Torres Strait Islander descent; or					
Both Aboriginal and Torres Strait Islander descent						
I am accepted as such by the community in which I live or have lived						
Please name the Aboriginal / Torres Strait Islander community from which you descend or are accepted as a member?						
What are your personal or academic achievements?						
Describe a situation or an event where you have used your leadership skills to inspire and positively influence others.						
Describe how you are or intend to contribute to the Aboriginal and/or Torres Strait Islander community and/or University community.						

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Describe your career/work goals for the future and how your course will assist you to meet those goals?					
Describe how this scholarship will benefit/assist you with your studies?					
Please use this space to submit any additional comments in support of your application					
Do you receive any other scholarships? No ☐ Yes ☐ please provide nar	me/s of scholarship/s?				
Do you receive a Centrelink allowance? No Yes please provide nar	me of allowance?				
bo you receive a Certifellink allowance: No res please provide hai	ne of allowance:				
Please attach the following documents to complete your application:					
 Referee statement (from a current employer, community leader or university staff member) 	attached				
Copy of your resume	attached				
 Any other relevant documents you wish to supply to support your application - Maximum of 4 (sides) x A4 pages) 	attached attached				
Important: Giving false or misleading information is a serious offence under the Criminal Code Act 1995					
Declaration: I declare that the information I have supplied on this form and in associated attachments is complete, true and correct, to the best of my knowledge. I understand that if any information is found to be incorrect, my application may be cancelled.					
Signature	Date				