

2019 Student Application Form*

John James Foundation Specialist Elective (Clinical Placement) Program

Placement Dates: September to November 2019

Applicant Contact Details	
Full Name:	
Student Number:	
Campus:	
Postal Address:	
Phone Number:	
Email:	
Do you identify as an Indigenous Australian?	Yes <input type="checkbox"/> No <input type="checkbox"/>

*Your application should be a maximum of 3 pages plus a copy of your results transcript.

Application Statement

Please provide a short statement as to why you believe you would benefit from participating in the program (Max: 250 words)

Previous Placements:

Provide details of previous placements highlighting any that were in rural or remote areas (where, when, discipline, placement duration – Max: 500 words).

Future preferences for practice specialty or location:

List your preferences, if any, for practice in the future either by way of speciality or location of practice (Max: 150 words).

Transcript of Academic Results:

Attached

Provide a summary of your current academic performance (please attach a copy of your current transcript)

Anything you would like to add (optional):

Is there anything else not already covered you would like to add to your application.

Professional referee information (at least two required)

NAME	
TITLE AND POSITION HELD	
PHONE	
EMAIL	

NAME	
TITLE AND POSITION HELD	
PHONE	
EMAIL	

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PHONE	
EMAIL	