

Parkinson's Neurodegenerative Disorders Graduate Certificate Scholarships Application Form - 2010

Background: The Graduate Certificate Neurodegenerative Disorders is being offered by The University of Notre Dame. The course specialises in the caring for clients with Parkinson's disease. The course will be provided by distance education and will include a residential component each semester. The certificate includes 4 subjects and is 12 months in duration.

Selection Criteria: Scholarships will be awarded by the recommendation of a selection committee and will be based on the following criteria:

- Current and Previous employment in the Health Care sector
- Experience with working with patients living with Parkinson's disease
- An intention to work with patients living with Parkinson's disease at the completion of the course

Name: **Surname:**

Other names:

Telephone: **Mobile No:** **Fax:**

E-mail:

Registration/Enrolment No. in NSW:

Department/Section:

Postal Address: (Private)

Postal Address: (Business)

Present Employment Position:

Employer's Name:

Total Length of Service in NSW:

Have you been continuously employed in nursing in NSW for the two years immediately prior to this application? (Please circle) Yes/No

Have you worked with patients living with Parkinson's disease? Yes/No
(Please give details)

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Are you currently working with patients living with Parkinson's disease? Yes/No
(Please give details)

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If you are not currently working with patients living with Parkinson's disease can you demonstrate an intention to work with this patient group after the completion of the course? Yes/No

(Please give details).....

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Do you comply with the registration requirements of the Notre Dame course? Yes/No

(Please give details).....

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Please see Notre Dame Website:
<http://www.nd.edu.au/sydney/future%20students/admissionReqs.shtml>

Please note: If you are granted a scholarship you will need to forward transcripts at the end of each semester to Parkinson's NSW Inc and at the end of the course submit a written report for the Parkinson's NSW magazine "Stand by Me" and Parkinson's NSW 2010 Annual Report.

I agree to the above conditions.

Name:.....

Signature.....

Date.....