

2024 Graham Burrows Travelling Scholarship Application Form

Form Preview

Applicant Details

* indicates a required field

Professor Graham Burrows AO (1938-2016) was a mental-health clinician, researcher, mentor, and advocate. In addition to his role as an academic at the University, Professor Burrows was the Director of Psychiatry at Austin Health. He was actively involved in the Australian Medical Association, and the Royal Australian and New Zealand College of Psychiatrists, as well as numerous international organisations, including The International Society for the Investigation of Stress. Professor Burrows advocated strongly for the mentally ill and published over 743 scientific articles, as well as authoring or co-authoring more than 104 books/chapters during his career. He was the first psychiatrist to be awarded the Doctor of Science Degree in 2004 at the University of Melbourne. The [Graham Burrows Travelling Scholarship](#) commenced in 2018.

One annual travelling scholarship is awarded, with the amount to be determined by interest on endowed funds annually, **for 2025 three scholarships of \$3,500 will be awarded.**

Eligibility: A PhD student, within the [Department of Psychiatry](#), to present at an international conference.

Requirements: A presentation and submission of a written report on the outcomes of the scholarship is to be undertaken on return in the year the scholarship is awarded.

Applications Due: Monday 27 January 2025 at 11.00pm

Name *

| Title | First Name | Last Name |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

Supervisor

Department and School

Institution

This question is read only.

Mobile

Must be an Australian phone number.

Student Number

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Must be a number.

Email *

Must be an email address.

Eligibility Criteria

Please note that your eligibility will be checked using the below confirmations, in addition to being reviewed prior to your application being sent for assessment.

I confirm the following to be true: *

- I am a current PhD candidate enrolled through the Department of Psychiatry
- Funding will be used for travel to an international conference

Project Summary

* indicates a required field

Project Title *

• Briefly describe the proposed scholarship activity (200 words maximum). • Do not directly address Selection Criteria, as responses to each criterion are to be provided in Section C.

Word count:

Must be no more than 200 words.

Selection Criteria

C. Selection Criteria

In no more than 1,000 words, describe how your application meets the following selection criteria: • The potential to make a significant contribution to mental health research and approaches • A capacity to communicate complex ideas and theory, and ability to undertake research in a clinical setting.

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Word count:
Must be no more than 1000 words.

Learning and Research Objectives

D. Learning and Research Objectives

- Please specify up to three learning or research objectives you hope to achieve as a result of the scholarship.

-----D. Learning and Research Objectives (1)

Learning/Research Objective #1

Learning/Research Objective #2

Learning/Research Objective #3

-----D. Learning and Research Objectives (2)

Learning/Research Objective #1

Learning/Research Objective #2

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Learning/Research Objective #3

-----D. Learning and Research Objectives (3)

Learning/Research Objective #1

Learning/Research Objective #2

Learning/Research Objective #3

Potential Outcome of the Scholarship

E. Potential Outcome of the Scholarship

• Please detail, in no more than 500 words, the anticipated outcome of the scholarship on your research experience and knowledge in psychiatry.

Word count:

Must be no more than 500 words.

Letters of Reference

• **Two letters of support** from senior members of the Department of Psychiatry are to be attached to this application and emailed with the application (see below). • **Contact details** for each reference should be included.

| Name | | | Email | Phone Number |
|-------|------------|-----------|-------|--------------|
| Title | First Name | Last Name | | |

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| Title | First Name | Last Name | | |
|-------|------------|-----------|---------------------------|-------------------------------------|
| | | | Must be an email address. | Must be an Australian phone number. |

Letter of Support #1

Attach a file:

Letter of Support #2

Attach a file:

Submission of Application

* indicates a required field

Application Review

Prior to submitting your application below, please ensure the following has been completed to ensure your application will go through to assessment:

- You have reviewed the eligibility criteria and are certain you meet them.
- You have completed each section, including the project summary, selection criteria, learning and research objectives and outcomes.
- You have uploaded TWO letters of reference from senior members of the Department of Psychiatry, UoM.

Submission of Application

Agreement to Terms and Conditions:

- The awarding of this scholarship is based on information that you have provided to The University of Melbourne.
- Your application may be withdrawn at any time if you have provided incorrect information or withheld relevant information.

I certify that the information supplied in this application is true and correct to the best of my knowledge. If this application leads to being awarded this scholarship, I understand that false or misleading information may lead to forfeiting this scholarship and any associated monies. By submitting this application, I agree to allow The University of Melbourne to publish my name and/or photo on the Department/School/Faculty website, in publications, and other University materials. I hereby agree to The University of Melbourne using, reproducing, and disclosing photographs of me for use in teaching materials, promotional, and marketing materials, publications and/or on its website.

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I acknowledge travel must be undertaken in the year that the scholarship is awarded, and that I will be required to make a presentation and submit a written report on the outcomes on my return.

*

- I have read, understand, and agree to abide by the terms of this award.