

Expression of Interest: Funding for Supervisors of Aboriginal and Torres Strait Islander Higher Degree by Research Candidates

Applicant Details

Title, First Name, Surname	
Email Address	
School	
Research Centre or Institute (if applicable)	
Current ECU employment	<input type="checkbox"/> Ongoing <input type="checkbox"/> Contract: End date _____
Position type	<input type="checkbox"/> Research Only <input type="checkbox"/> Teaching/Research <input type="checkbox"/> Other (please specify) _____

Why are you interested in completing the microcredential? How does it relate to your current and planned Indigenous research and HDR supervision plans? (200-word limit)

How will achieving this microcredential enhance your current/future supervision of Aboriginal and Torres Strait Islander Candidates and projects? (200-word limit)

School Support

Arrange support and signature of your School Associate Dean (Research) and Associate Dean (Discipline).
(If you currently have one of these roles, please organise for your Executive Dean's approval).

Yes, I support this application
 No, I have reservations regarding supporting this application

If no, please provide details:

ADR Name:

Signature: **Date:**

Yes, I support this application
 No, I have reservations regarding supporting this application

If no, please provide details:

ADD Name:

Signature: **Date:**

Applicant signature

As the applicant, I confirm that:

- I have read and understand the Guidelines.
- I meet the eligibility criteria.
- I confirm I can meet the stated course attendance and assessment requirements.

Applicant Name:

Signature:

Date: