**International PhD Scholarship**

**Expression of Interest**

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| **PERSONAL DETAILS:** | | | | | | | | | | | | | | | | | | |
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| Surname: | |  | | | | | | | First Name: | | |  | | | | | | |
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| Email Address: | |  | | | | | | | | | | | | | | | | |
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| Have you applied for more than one project? (yes/no) | |  | | | | | | | If yes, have you declared this to the other supervisors? (yes/no): | | |  | | | | | | |
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| What country are you currently living in? | |  | | | | | | | Passport (Issuing country): | | |  | | | | | | |
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| Supervisor name | |  | | | | | | | | | | | | | | | | |
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| Project Title | |  | | | | | | | | | | | | | | | | |
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| **EDUCATION:** | | | | | | | | | | | | | | | | | | |  | | |
| **Degree** | | | **Institution** | | | | **Field** | | | | | | **Grade Point Average**  **e.g 6 out of 7** | | **Date awarded** | | | |
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| **EMPLOYMENT HISTORY: (Most recent first)** | | | | | | | | | | | | | | | | | | |
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| **PUBLICATIONS: List your 5 most relevant publications to the project.**  **If you have more than 5 relevant publications, please list them separately in a word document.**  **If you have a preprint publication, please list it but clearly indicate which preprint repository the publication has been submitted to, and the date it was submitted e.g. bioRxiv, medRxiv, Nature Precedings, ScienceOpen**  **Do not list ‘submitted’ or ‘in draft’ publications or conference abstracts.**  **Only list papers published in English.** | | | | | | | | | | | | | | | | | | |
| **Authors** | **Title** | | | **Journal** | | | | | | **Year** | | **Volume & page information** | | **Status** | | | | |
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| **PRESENTATIONS: List your top 4 relevant presentations.**  **If you have more than 4 presentations, please list them separately in a word document. (Only include those where you were the presenting Author and are relevant to the project)** | | | | | | | | | | | | | | | | | | |
| **Conference** | **Location** | | | | **Year** | | | | | | **Title** | | | **Oral or Poster Presentation** | | | | |
|  |  | | | |  | | | | | |  | | | Oral | |  | | |
|  |  | | | |  | | | | | |  | | | Poster | |  | | |
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| **RESEARCH EXPERIENCE:**  **List your research experience that is relevant to the project you are applying for.** | | | | | | | | | | | | | | | | | | |
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| **RELEVANT TRAINING COMPLETED WITHIN THE LAST 3 YEARS:** | | | | | | | | | | | | | | | | | | |
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| **WHAT ARE YOUR MAJOR STRENGTHS?:** | | | | | | | | | | | | | | | | | | |
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| **BRIEFLY OUTLINE HOW YOUR BACKGROUND IS SUITABLE FOR THE PROJECT:** | | | | | | | | | | | | | | | | | | |
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| **WHAT AREAS DO YOU THINK YOU COULD BENEFIT FROM ADDITIONAL TRAINING?:** | | | | | | | | | | | | | | | | | | |
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| **HAVE YOU EVER COMMENCED A PhD DEGREE PREVIOUSLY? If yes, please explain why you withdrew.** | | | | | | | | | | | | | | | | | | |
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| **ENGLISH LANGUAGE PROFICIENCY:**  **Please detail your results below (including the date of the test) or the date of a booked test. Otherwise explain why you are exempt.** | | | | | | | | | | | | | | | | | | |
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| **PROVIDE THE DETAILS OF THREE REFEREES. You are responsible to contact the referees and ensure they provide their reports before the deadline. Reports should be emailed to: Graduateeducation@qimrberghofer.edu.au** | | | | | | | | | | | | | | | | | | |
| **Name** | | | | | | **Position** | | | | | | **Email Address** | | | | | | |
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| **CHECKLIST: Email each EOI application as a single pdf to graduateeducation@qimrberghofer.edu.au. EOIs that do not follow these instructions, or are incomplete will be disregarded. Each application must contain supporting documents.** | | | | | | | | | | | | | | | | | | |
| **Completed EOI Form** | | | | | | | |  | | | **Academic CV** | | | | | | |  |
| **Undergraduate Academic Transcript (please provide a grading guide)** | | | | | | | |  | | | **English Proficiency Test Certificate** | | | | | | |  |
| **Postgraduate Academic Transcript (please provide a grading guide)** | | | | | | | |  | | | **I have contacted three referees to provide reports** | | | | | | |  |
| **I DECLARE THAT THE INFORMATION THAT I HAVE PROVIDE IS ACCURATE AND TRUTHFUL:** | | | | | | | | | | | | | | | | | | |
| **Full name** | | | | | |  | | | | | |
| **Signature** | | | | | |  | | | | | |
| **Date** | | | | | |  | | | | | |



Privacy Collection Notice – Students

# Who We Are

The Council of the Queensland Institute of Medical Research, trading as QIMR Berghofer

("we," "us," or "our") is committed to protecting your privacy in accordance with the *Information Privacy Act 2009* (Qld). Our Privacy Policy contains further information about how we collect, use, store and disclose your Personal Information.

# Why We Collect Your Information

QIMR Berghofer collects personal information from students to manage and facilitate your placement, coordinate with your educational institution, ensure compliance with legal and safety requirements, communicate with you about your placement, and support your learning experience.

# Types of Personal Information We Collect

We may collect information such as your name, contact details, educational background, emergency contact information, immigration information, health and medical information relevant to your placement, and any other information necessary to support your placement and wellbeing.

# How We Collect Information

Where possible, we collect personal information directly from you. We may also receive information from your educational institution or placement coordinator, with your consent or as permitted by law.

# Legal Basis for Processing

We collect and use your information only where:

* You have given consent;
* It is necessary to fulfil a contract or legal obligation; or
* It is required for legitimate educational and organisational purposes.

# Disclosure of Information

We may share your information with:

* Your educational institution or placement coordinator;
* Service providers assisting with placement administration (e.g., IT, security);
* Government authorities (if required by law);
* Other parties as necessary to support your placement and comply with legal obligations.

# Overseas Transfers

We may disclose your personal information to overseas recipients, including where you are enrolled at an international university and disclosure is necessary to facilitate or otherwise administer your placement. Such disclosure will only occur where:

* We are satisfied on reasonable grounds that the recipient is subject to privacy obligations substantially similar to those under Queensland law; or

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| Locked Bag 2000  Royal Brisbane Hospital QLD 4029 | 300 Herston Rd  Herston QLD 4006  Australia | Tel +61 7 3362 0222 Fax +61 7 3362 0111 enquiries@qimrb.edu.au | 1 **QIMRB.EDU.AU** |



Privacy Collection Notice – Students

* Another permitted situation under the *Information Privacy Act 2009* (Qld) applies.

Before any disclosure, we will take reasonable steps to ensure your personal information will be handled in accordance with the Queensland Privacy Principles (QPPs), including by contract or other binding arrangement.

# Data Breach Notification

In the event of a data breach likely to cause harm, we will notify you and the Queensland Office of the Information Commissioner (OIC) as required by law.

# Access and Correction

You have the right to:

* Request access to your personal information;
* Correct inaccurate or incomplete details.
* Contact our Privacy Officer at PrivacyOfficer@qimrberghofer.edu.au to exercise these rights.

# Complaints

If you believe we’ve breached privacy laws, contact our Privacy Officer. You may also lodge a complaint with the Queensland OIC:

Office of the Information Commissioner

Website: www.oic.qld.gov.au

Phone: 07 3234 7373

# Consequences of Not Providing Information

If you choose not to provide required information, we may be unable to facilitate your placement or ensure your safety and compliance with placement requirements.

# Retention Period

We retain your information only for as long as necessary to fulfil the purposes outlined in this notice or as required by law.

# Contact Us

For privacy related inquiries, contact PrivacyOfficer@qimrberghofer.edu.au.

Locked Bag 2000 300 Herston Rd Tel +61 7 3362 0222

Royal Brisbane Hospital Herston QLD 4006 Fax +61 7 3362 0111 2

QLD 4029 Australia enquiries@qimrb.edu.au **QIMRB.EDU.AU**