

Otago Medical School

**Freemasons Scholarships in Paediatrics and Child Health**

**2024**

Applications are invited for Research Scholarships for 2025 from individuals who intend long term to pursue work in Paediatrics or Child Health within New Zealand.

Applications must be submitted electronically to [hrs@otago.ac.nz](mailto:hrs@otago.ac.nz)

by: **Thursday 1st August 2024 at 5pm.**

These **Scholarships** are intended to provide support to a scholar whose programme of work or research would lead to a higher degree and whose work is within the field of Paediatrics & Child Health.

1. This form is for applicants who are or intend to enrol in a higher research degree.
2. Scholarships are to be awarded annually and be for a duration of one year. Applicants who wish to extend their Scholarship must submit a second application for assessment accompanied by a satisfactory progress report.
3. Scholarships are tenable in one of the Departments of Paediatrics in the University of Otago, Otago Medical School (OMS) except when the Selection Committee approves an attachment to another Department of the said University or exceptionally, in an overseas institution.
4. For recipients enrolled in a higher degree, the value of a scholarship awarded in 2024 is expected to be a tax-free stipend of $40-80,000 including fees depending on the background training of the recipient. Part-time scholarships will be considered.

A salaried **Training Fellowship** or **Research Fellowship** may be considered for the right candidate. More detailed applications will be required from Fellowships applicants. Please see the attached regulations and contact [hrs@otago.ac.nz](mailto:hrs@otago.ac.nz) for more details.

**Full regulations are attached.**

**Scholarship Application process**

Please complete all sections on the application form below, and attach:

* **your current Curriculum Vitae** (in standard RS&T format) <http://www.otago.ac.nz/research/forms/5_NZ%20RS&T%20CV%20Template/>
* **a letter of support from your supervisor** including confirmation of any budgetary implications for the research group or department and how these will be handled.
* **a signed statement of support from the relevant OMS Head of Department** confirming that they are aware of this application and support it. Additionally, they must confirm that the Department has the resources and infrastructure to enable this project to be successfully carried out.

Preliminary information and advice may be obtained from the Head of any Department of Paediatrics and Child Health in the Otago Medical School:

|  |  |  |
| --- | --- | --- |
| Professor Ben Wheeler  Dept. of Women’s & Children’s Health  Dunedin School of Medicine  PO Box 56  DUNEDIN  ben.wheeler@otago.ac.nz | Professor Tony Walls  Dept. of Paediatrics  University of Otago, Christchurch  PO Box 4345  CHRISTCHURCH  tony.walls@otago.ac.nz | Professor Esko Wiltshire  Dept. of Paediatrics & Child Health  University of Otago, Wellington  PO Box 7343  WELLINGTON  esko.wiltshire@otago.ac.nz |

**All other enquiries to:** Health Research South

Email [hrs@otago.ac.nz](mailto:hrs@otago.ac.nz)

**Application Form follows. Please delete the information above.**



Otago Medical School

**Application for Freemasons Postgraduate Scholarships in Paediatrics and Child Health**

**2024**

*Applications must be submitted as one PDF file and emailed to:* [hrs@otago.ac.nz](mailto:hrs@otago.ac.nz)

*Application deadline: 5pm Thursday 1st August 2024*

*Notes in blue are provided to help you complete this application & can be deleted.*

**Personal Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Full name:** |  |  |  | | |
|  | *Surname* |  | *Given names*  *(Please highlight the name by which you wish to be known)* | | |
| **Email address** |  | | | **Student ID** |  |

**2025 Intended Enrolment Details**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Degree:** |  | | | | | | | |
| **Commencement date:** | | | |  | | **Expected completion date:** | |  |
| **Project title:** | | |  | | | | | |
|  | | |  | | | | | |
| **Department:** | | |  | | | | | |
|  | | |  | | | | | |
| **Supervisor(s):**  *(Name, Department)* | | |  | | | | | |
| In 2025, I will be enrolled in the above research degree | | | | | | | | |
| Full-time | | Part-time | | | Full-year | | Part-year | |
| **Comments:**  *(Please note any employment or other positions of emolument to be held concurrently with the Scholarship)* | | | | | | | | |

**Qualifications & Eligibility**

|  |  |  |
| --- | --- | --- |
| **Postgraduate & undergraduate qualifications** *(add more rows if necessary)* | | |
| **Qualification** | **Institution** | **Start/end dates** |
|  |  |  |
|  |  |  |
|  |  |  |

**Application details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **I am applying for a scholarship for** | | full-time/part-time | | **study** |
| **starting on the** | 1st January 2025 | **until** | 31st December 2025 *(edit if required)* | |

**Project & proposed career path**

***Write concisely and clearly for a scientifically knowledgeable audience, who are not necessarily specialists in your area.***

*Maximum 3 A4 pages.*

1. **Briefly describe your project, including aims, methodology and expected outcomes.**
2. **Provide a brief statement as to the contribution this fellowship may make to knowledge and child health research in New Zealand.**
3. **Describe your future intended career path and how this research will contribute to your future plans.**

**Other funding and pending applications**

|  |  |  |
| --- | --- | --- |
| **Have you previously held a Freemason NZ Fellowship/Scholarship?** | No | Yes |

**If yes, please provide the term, and provide a detailed account of progress to date below.**

*Maximum half an A4 page.*

**Outline any funding that you have received, applied, or intend to apply for which is relevant to this application.**

*The table below is provided as an example of one option for presenting scholarship applications.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Scholarship** | **Tuition/stipend provided** | **Status** | **Date result expected** |
| *Example Scholarship application* | *$10,000 Stipend only* | *Application* | *End of August 2001* |
| *Example Scholarship* | *$10,000 Stipend and tuition fees* | *Awarded Jan 2023-Dec2023* | *n/a* |

**Attachment checklist**

Your Curriculum Vitae (in standard RS&T format)

<http://www.otago.ac.nz/research/forms/5_NZ%20RS&T%20CV%20Template/>

Signed support letter from your supervisor, including notes on budgetary implications.

Signed support statement from the relevant OMS Head of Department

**Signatures**

By signing this application, you are confirming that you are committed to fulfilling all requirements and informing Health Research South if your circumstances change.

|  |  |  |  |
| --- | --- | --- | --- |
| **Student:** |  | **Date:** |  |