VICE-CHANCELLOR’S PROFESSIONAL DEVELOPMENT SCHOLARSHIPS FOR ACADEMIC AND PROFESSIONAL STAFF - APPLICATION

Please read the [Guidelines](https://www.westernsydney.edu.au/__data/assets/pdf_file/0003/278922/VCPDSships_AllStaff_Guidelines.pdf) before completing this application.

This form must be completed electronically and forwarded to your Dean/Director/PVC/DVC for endorsement.

Note:this is a merit-based process and only activities taking place next year, as well as eligible and complete applications will be considered by the selection panel.

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| 1. Personal Details | | | | | | | | | | | | | | | | |
| Staff ID | | |  | | | | | Title | | | |  | | | | |
| First name | | |  | | | | | Last name | | | |  | | | | |
| Contact number | | |  | | | | | E-Mail | | | |  | | | | |
| 1. Position Details | | | | | | | | | | | | | | | | |
| Employment type | | | |  | | | | | HEW / Academic level | | | | |  | | |
| Position title |  | | | | | | | | Job status \* *Refer to guidelines for eligibility* | | | | | |  | |
| School/Unit |  | | | | | | | | Home campus | | | |  | | | |
| Dean / Executive Director / DVC / PVC | | | | |  | | | | | Length of employment at Western (continuous) | | | | | |  |
| 1. Professional Development Activity Details | | | | | | | | | | | | | | | | |
| Activity type | |  | | | | | Activity title | | | |  | | | | | |
| Brief description of this Professional Development Activity | | | | | | | | | | | | | | | | |
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| Proposed dates of the activity | | | | | |  | | | | | | | | | | |

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| 1. If Conference, Attendance Details | | | | | | | | | | | | | |
| Do you propose to present a paper at the conference: Yes\*  No  *\* Please attach a copy of the abstract* | | | | | | | | | | | | | |
| Conference title | | | | | |  | | | | | | | |
| Place of the conference | | | | | |  | | | | | | | |
| Link for the conference website | | | | | | | |  | | | | | |
| 1. If Workshop / Seminar / Short Course, Details | | | | | | | | | | | | | |
| This application is for a | | | | |  | | | | | | | | |
| Activity title | | |  | | | | | | | | | | |
| Please provide or attach a description of the activity or provide a web link to the information | | | | | | | | | | | | | |
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| 1. Cost of Activity | | | | | | | | | | | | | |
| Please provide full details of costs, including course/conference fees, travel, and accommodation costs (if applicable) and incidental costs | | | | | | | | | | | | | |
| Conference registration fees, or | | | | | | | | | | | | $ |  |
| Course/Activity fee | | | | | | | | | | | | $ |  |
| Accommodation | | | | | | | | | | | | $ |  |
| Airfares | | | | | | | | | | | | $ |  |
| Meals/Incidentals | | | | | | | | | | | | $ |  |
| Other (please specify) | | | | | | | | | | | | $ |  |
| Total | | | | | | | | | | | | $ |  |
| Cost centre | | | |  | | | | | Project code | |  | | |
| Have you or will you receive any support or funding for this activity from any other source (University or external)? Yes  No | | | | | | | | | | | | | |
| If yes, please provide details | | | | | | |  | | | | | | |
| If the scholarship does not meet the full costs of the proposed activity, how will the balance be paid? | | | | | | | | | | | | | |
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| 1. Reasons for Applying for the Scholarship | | | | | | | | | | | | | |
| 1. Academic Staff: How will this scholarship benefit your career, professional development, teaching or research? (Maximum 200 words) | | | | | | | | | | | | | |
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| 1. Professional Staff: How will this activity benefit your current position, your career and/or professional development? (Maximum 200 words) | | | | | | | | | | | | | |
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| 1. Describe any hardship or equity considerations from the past two (2) years that you would like the selection panel to take into account - Optional (maximum 200 words) | | | | | | | | | | | | | |
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| 1. What are your proposed actions and outcomes for sharing your activity experience with your University colleagues? | | | | | | | | | | | | | |
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| 1. List allprofessional development courses and activities and all work-related conferences attended in the past two (2) years (both University and external to University). | | | | | | | | | | | | | |
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| 1. Declaration and Signature | | | | | | | | | | | | | |
|  | I confirm I have read the Vice-Chancellor’s Professional Development guidelines and understand the conditions and eligibility criteria for this application. | | | | | | | | | | | | |
|  | I certify that the information contained herein is accurate and current at the time of submission and understand that by making this application it is not guaranteed that a Scholarship will be offered to me. | | | | | | | | | | | | |
|  | I confirm that I have completed all mandatory modules on MyCareer Online. | | | | | | | | | | | | |
|  | I have attached a copy of my 2023 Work Planning and Career Development review. | | | | | | | | | | | | |
| Applicant’s Signature | | | | | | | | | | Date | | | |
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| 1. Application Checklist | | | | | | | | | | | | | |
| Attachments included: | | | | | | | | | | | | | |
|  | | Letter of Support from the Dean/ Director/ PVC/ DVC *(See Appendix A)* | | | | | | | | | | | |
|  | | Copy of the 2023 Work Planning and Career Development Plan | | | | | | | | | | | |
|  | | Past Scholarship report (if applicable) | | | | | | | | | | | |
| 1. Submission and Closing Date | | | | | | | | | | | | | |
| Please save this application and any accompanying documents as a single PDF file named [SURNAME]\_[StaffID]\_ApplicationVCPDAllStaff, and submit it to [staffscholarships@westernsydney.edu.au](mailto:staffscholarships@westernsydney.edu.au) using the same document title in the email subject, by Monday 16 October 2023  **Note**:   * Recipients of the Scholarship will be required to submit a brief report on the outcomes of the activity to the Office of People, via [staffscholarships@westernsydney.edu.au](mailto:staffscholarships@westernsydney.edu.au) (max 300 words) within 1 monthof completing it, as well as undertake a presentation or publication on the outcomes. * Please note recipients of a Vice-Chancellor’s Professional Development Scholarship are not eligible to apply for another scholarship in the year following the award of the scholarship. | | | | | | | | | | | | | |

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| Appendix A – Statement of Support (Dean / Director / DVC / PVC) | | |
| 1. What are the reasons for supporting this application? | | |
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| 1. What are the benefits or value that this activity will have to the staff member’s career and professional development? | | |
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| 1. What are the benefits or value that this activity will have to the organisational unit? | | |
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| 1. What other support or funding, if any, will your Unit/School provide? | | |
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| I confirm that: | | |
| * The applicant has consistently met or exceeded expectations in their Work Planning and Career Development plan | |  |
| * The proposed course of study has been discussed and agreed to as part of the applicant’s Work Planning and Career Development plan (Note: copy of this must be attached to this application) | |  |
| I support this application for the Vice-Chancellor’s Professional Development Scholarship | | |
|  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Name Of Dean/ Director/ PVC/ DVC (Print) | Signature | |