

POSTGRADUATE STUDY SCHOLARSHIP ASSESSMENT CRITERIA

Section 1: Applicant and Course Details

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|---------------------------------------|--|
| Name of Scholarship Applicant: | |
| Current Employment Role of Applicant: | |
| Proposed Course of Study: | |
| Higher Education Provider: | |
| Proposed Timeline of Course of Study: | |

Section 2: Applicant Eligibility

| | | |
|--|--|---|
| Is the applicant a current ASMIRT Voting Member? | <input type="checkbox"/> Yes <i>(Proceed to next question)</i> | <input type="checkbox"/> No <i>(The applicant does not meet the eligibility criteria for consideration)</i> |
| If yes, has the applicant been a continuous ASMIRT Voting Member for a minimum of: - 3 years (Graduate Certificate) - 4 years (Graduate Diploma) - 5 years (Master's) | <input type="checkbox"/> Yes <i>(The applicant meets the eligibility criteria for consideration)</i> | <input type="checkbox"/> No <i>(The applicant does not meet the eligibility criteria for consideration)</i> |

Section 3: All documentation provided

(If any documentation has not been provided, the applicant will need to provide this prior to the application being assessed)

| | Yes | No | |
|--|--------------------------|--------------------------|------------------------------|
| Completed Application | <input type="checkbox"/> | <input type="checkbox"/> | |
| Proposed Course Outline (detailed course information provided; website link is insufficient documentation) | <input type="checkbox"/> | <input type="checkbox"/> | |
| Resume | <input type="checkbox"/> | <input type="checkbox"/> | |
| Statement addressing the Selection Criteria | <input type="checkbox"/> | <input type="checkbox"/> | |
| ASMIRT Voting Member Evidence | <input type="checkbox"/> | <input type="checkbox"/> | |
| Other funding source evidence | <input type="checkbox"/> | <input type="checkbox"/> | N/A <input type="checkbox"/> |



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Section 4: Assessment of Application

| Selection Criteria | 0 - 2 | 2 - 4 | 4 - 6 | 6 - 8 | 9 - 10 | Score |
|--|--|--|---|---|---|-------|
| The relationship between the proposed course of study and current discipline of practice. | No link made. | Tenuous link made. | Minor links made. | Clear and considered links made. | Strong and evidence-based links made. | |
| How the proposed course of study will enhance or diversify skills and knowledge within current discipline of practice. | No connections made. Insufficient course documentation provided. | Tenuous connections made. | Some minor connections made. | Considered connections made. These connections are relevant and thoughtful. | Strong connections made. These connections are relevant, thoughtful and evidence based. | |
| How the proposed course of study will improve the workforce and/or service delivery needs of the local community and patient care. | Little to no knowledge of local community needs demonstrated. No connections made. | Broad knowledge of local community needs demonstrated. Weak connection made with no evidence base. | Some specific local community needs demonstrated. Reasonable connection made with effective reference to evidence base. | Sound, specific knowledge of local community needs demonstrated. Effective connection made and evidence base. | Excellent and highly specific knowledge of local community needs demonstrated. Connection is highly relevant, and evidence based. | |
| Personal commitment and understanding of the need to undertake further study and professional development (PD). | No commitment to PD demonstrated. | Little demonstration of PD commitment. | Weak demonstration of PD commitment. | Sound demonstration of PD commitment. | Clear demonstration of a strong personal commitment to PD. | |
| Resume provides further evidence of a personal commitment to professional development (PD). | No evidence of PD commitment provided. | Little evidence of PD commitment provided | Some good examples of PD commitment provided | Sound and recent examples of PD commitment provided. | Strong, relevant, and recent examples PD commitment provided. | |
| TOTAL SCORE (50) | | | | | | |



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Assessors Comments:



| | |
|--|--|
| <p>Quality of the application (appealing presentation, ease of understanding, appropriate use of language, syntax, spelling and/or grammatical errors, formatting).</p> | |
| <p>Justification for the proposed course of study (relationship to the applicant’s current discipline of practice and how the course of study will enhance or diversify the applicant’s skills and knowledge).</p> | |
| <p>Sound understanding of the health care, workforce and service delivery needs of the local community and demonstration of how the course of study will enhance this.</p> | |
| <p>Demonstrated personal commitment to professional development in application and resume.</p> | |



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