

2026



# ASMIRT

## Guidelines

### Student Placement Support Grant

*Your profession. Your future.*



There are a number of protected titles for medical radiation practice. They include:

Medical Radiation Practitioner (MRP)

Diagnostic Radiographer (DR)

Medical Imaging Technologist (MIT)

Radiographer

Nuclear Medicine Scientist (NMS)

Nuclear Medicine Technologist (NMT)

Radiation Therapist (RT).

For the purposes of our documentation we use the broad descriptor Medical Radiation Practitioner (MRP) recognising that it covers a range of areas of practice.



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## ASMIRT STUDENT PLACEMENT SUPPORT GRANT

### 1. Purpose

The Australian Society of Medical Imaging and Radiation Therapy (ASMIRT) offers the Student Placement Support Grant to assist ASMIRT student members with the financial challenges associated with final-year clinical placements.

While these placements provide invaluable hands-on experience and prepare students for professional careers, the associated costs—such as travel, accommodation, and lost income—can create a significant financial burden.

Each year, up to 100 grants of \$500 will be awarded to help cover expenses like travel, accommodation, and general living costs. This initiative reflects ASMIRT's ongoing commitment to supporting the next generation of medical radiation practitioners.

### 2. Details

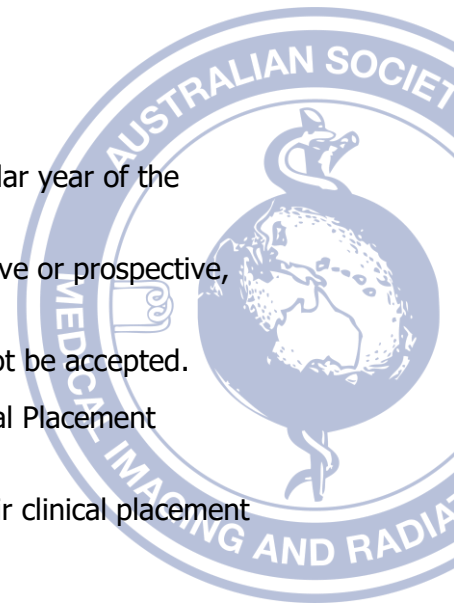
- This grant is available to ASMIRT student members enrolled in the final year of an Ahpra-approved entry-level Medical Radiation Science program in Medical Imaging, Radiation Therapy, or Nuclear Medicine.
- Up to 100 grants are awarded annually through a single application round, with applications closing on 1 July each year.
- Each grant is valued at \$500 and is intended to assist with travel, accommodation, living expenses, including uniforms, work-related equipment, meals, childcare, public transport fares, petrol costs, and parking, all associated with final-year clinical placements.
- Preference may be given to applicants who:
  - Have maintained ASMIRT membership over a longer duration
  - Are experiencing significant financial hardship
  - Need to travel considerable distances from their home or university to attend placement
  - Do not receive other financial support for their placement

### 3. Eligibility Criteria

To be considered for this grant, applicants must meet the following requirements:

- Be a non-voting (NV) student member of ASMIRT, with NV1 or NV2 membership status. (*Note: NV3 student membership are not eligible for this grant.*)
- Be enrolled in an Ahpra-approved entry-level course in Medical Imaging, Radiation Therapy or Nuclear Medicine at an Australian university.





- The clinical placement must be undertaken within the final calendar year of the accredited course.
- Placement details submitted in the application may be retrospective or prospective, provided the placement occurs in the final year of study.
- Applicants may only receive this grant once; reapplications will not be accepted.
- Applicants who have previously received the ASMIRT Rural Clinical Placement Scheme grant are still eligible to apply.
- Successful applicants may be required to submit feedback on their clinical placement experience.

#### **4. Selection Criteria**

Applicants are required to complete all sections of the application form, including a statement outlining how this funding will support them in undertaking their clinical placement. Applicants should include relevant details regarding financial hardship, additional placement-related expenses, or any loss of income or employment associated with completing the placement.

#### **5. Applications**

- Applications must be submitted electronically [[here](#)] (refer to Appendix 1 for a Sample Application Form).
- Each application must include the following:
  - A brief Curriculum Vitae (CV) (maximum 2 pages)
  - A student academic record that provides evidence of final year university enrolment
  - A declaration of any other funding or grants applied for or received, with complete details
  - A summary of contributions to the community, including involvement with ASMIRT and/or volunteering or community service
- Applications close on 1 July each year. To be eligible, all applications must be submitted by this date. Late submissions will not be accepted.

#### **6. Application Procedure**

- All completed applications will be reviewed by the ASMIRT Education Committee, which will make recommendations to the ASMIRT Board of Directors regarding the awarding of the Student Placement Support Grant.
- Successful applicants will be notified by email and provided with a form to submit their nominated bank account details for the transfer of grant funds. Applicants who do not return the completed form by the specified due date will be deemed to have forfeited the grant and will not be eligible for payment.
- Grant recipients may be publicly acknowledged in ASMIRT communications.





## 7. Assessment Criteria

Applications will be evaluated based on the following:

- Adherence to eligibility criteria
- Quality of the application and justification for financial hardship
- Incomplete applications will not be considered

## 8. Disclaimer

The decision made by ASMIRT will be final, and no correspondence will be entered into. ASMIRT does not accept appeals to its decision.

## 9. Further Assistance

For further assistance or more information, please contact the ASMIRT Education Team:

- Telephone: (03) 9419 3336
- Email: [scholarships@asmirt.org](mailto:scholarships@asmirt.org)

### Document Details

Version	Author(s)/reviewers	Date	Approved by	Date approved	Next Review
1	TM	26/05/2025	Ed Com		12 months
2	TM	27/05/2026	Ed Com	27/05/2026	12 months

### Version History

Version	Amendment Notes
1	Created May 2025
2	Grant numbers updated Online application link updated Eligibility Criteria updated Application Procedure updated





## APPENDIX 1.

### ASMIRT STUDENT PLACEMENT SUPPORT GRANT

#### Sample Application Form

This document is provided as a sample only!

Applications must be completed electronically through the following link:

[https://docs.google.com/forms/d/e/1FAIpQLSe0PDOdgg4QdzGUfHzu3CR7rhFZNRV\\_5h9uiFCBFBsha0\\_qvg/viewform?usp=header](https://docs.google.com/forms/d/e/1FAIpQLSe0PDOdgg4QdzGUfHzu3CR7rhFZNRV_5h9uiFCBFBsha0_qvg/viewform?usp=header)

For full details, please refer to the [Grant Guidelines](#).

If you have any questions about this application, contact us at [scholarships@asmirt.org](mailto:scholarships@asmirt.org).

#### ELIGIBILITY CRITERIA

Are you an ASMIRT student member?

Yes

No - You are not eligible for this grant. ASMIRT membership is FREE for students. [Join ASMIRT now](#)

Are you currently enrolled in an Apha approved entry level medical radiation science course?

Yes

No - Unfortunately, you do not meet the eligibility criteria for this grant. We encourage you to explore other opportunities available at [asmirt.org/scholarships](http://asmirt.org/scholarships), where you can find a range of ASMIRT scholarships and grants that you may be eligible for.

Are you completing your final year of clinical placements in the current calendar year?

Yes

No - Unfortunately, you do not meet the eligibility criteria for this grant. We encourage you to explore other opportunities available at [asmirt.org/scholarships](http://asmirt.org/scholarships), where you can find a range of ASMIRT scholarships and grants that you may be eligible for.

Unsure – email [scholarships@asmirt.org](mailto:scholarships@asmirt.org) - Unfortunately, you do not meet the eligibility criteria for this grant. We encourage you to explore other opportunities available at [asmirt.org/scholarships](http://asmirt.org/scholarships), where you can find a range of ASMIRT scholarships and grants that you may be eligible for.

#### PERSONAL DETAILS

First Name:

Last Name:

ASMIRT Member Number:

Residential Address (Please include State and Postcode):

Phone Number (please provide a phone number where you can be contacted during business hours):

University Email Address (Please provide your **university email address** for all correspondence):

Personal Email Address (Please provide your **personal email address**):

Are you of Aboriginal or Torres Strait Islander origin?

*Note: This for Data Collection Only.*

No

Yes, Aboriginal

Yes, Torres Strait Islander

Yes, both Aboriginal and Torres Strait Islander

Prefer not to answer



## UNIVERSITY DETAILS

Discipline:

- Medical Imaging
- Radiation Therapy
- Nuclear Medicine

Name of University:

- Central Queensland University
- Charles Sturt University
- Curtin University
- Deakin University
- Monash University
- Queensland University of Technology
- RMIT University
- University of Canberra
- University of Newcastle
- University of South Australia
- University of Sydney

University Student Number:

Name of Course:

University Campus:

What is your expected completion date? Please provide the month and year.

## CLINICAL PLACEMENT DETAILS

Have you already undertaken this clinical placement?

- Yes, I would like to apply retrospectively.
- No, I am applying for a clinical placement in the future.
- I am currently on my clinical placement.

Hospital, Department Name and Location (if known):

Commencement Date of Clinical Placement:

What is the duration of this clinical placement?

- Less than 4 weeks
- 5 to 8 weeks
- 9 to 12 weeks
- > 12 weeks

## CLINICAL PLACEMENT - ACCOMMODATION

Do you require temporary **Clinical Placement** accommodation?

- No, I can reside at my usual place of residence
- Yes, I require temporary accommodation close to my clinical placement
- Unsure

If temporary accommodation is required, please specify the type of accommodation (e.g., shared apartment, hotel, dormitory, etc.):

If temporary accommodation is required for this clinical placement, are you responsible for covering the associated accommodation expenses?

- Yes - Up to \$100 weekly
- Yes - \$200 to \$300 weekly
- Yes - More than \$300 weekly
- No, accommodation expenses are fully covered by the organisation
- I am unsure about the accommodation costs associated with my upcoming clinical placement
- Other –

If temporary accommodation is required for your clinical placement, will you continue to incur expenses for your primary residence, such as rent, while staying in alternative accommodation? (please provide details)

## CLINICAL PLACEMENT – TRANSPORT EXPENSES

Are you responsible for covering any flight expenses related to this clinical placement?

- No
- Yes - Up to \$500

- Yes - \$500 to \$1000
- Yes - More than \$1000

Are you responsible for any commuting expenses during this clinical placement?

This may include public transport fares, petrol costs or parking fees.

- No
- Yes - Up to \$100 weekly
- Yes - \$100 to \$300 weekly
- Yes - More than \$300 weekly

Distance from accommodation during placement (usual or temporary) to the clinical placement site (km):

#### CLINICAL PLACEMENT – OTHER EXPENSES

Please detail any other estimated/known costs directly related to your clinical placement.

These may include uniforms, work-related equipment, meals, childcare and other essential expenses.

#### CLINICAL PLACEMENT – FINANCIAL IMPACT

What is the expected overall financial impact of this placement?

- Minimal – I anticipate only minor costs (e.g., meals, transport)
- Moderate – There will be some significant costs, but I can manage
- High – The placement will have a substantial financial impact on me

Do you have any dependents or caregiving responsibilities?

(Dependents may include children, spouses, or other individuals who rely on you for financial or personal support.)

- No, I do not have any dependents or caregiving responsibilities
- Yes, I have dependents who rely on me for financial or personal support

Will you need to reduce your current paid employment hours to undertake this clinical placement?

- Yes – I will need to stop working completely
- Yes – I will significantly reduce my work hours
- No – I will maintain my current work hours
- I am not currently in paid employment

#### FINANCIAL SUPPORT & ASSISTANCE

Will you receive any financial assistance during your clinical placement? (Select all that apply)

- No
- Yes; Government Benefits (e.g. Centrelink)
- Yes; Scholarship or grant received from another source (excluding this application), e.g. ASMIRT, clinical placement site, or university
- Yes; Free or subsidised accommodation
- Yes; Loans
- Yes; Parental/Guardian Support
- Yes; Employment income from part-time or casual work, or from your clinical placement
- Yes; Other

If you selected "Yes" to receiving financial assistance during your clinical placement, please provide details below:

#### HOW THIS FUNDING WILL SUPPORT YOUR CLINICAL PLACEMENT

How will this funding support your clinical placement?

*Please outline how this funding will assist you in undertaking your clinical placement. Include any relevant information regarding loss of income or employment, additional expenses, or other financial challenges associated with completing your placement. (300 words)*

#### CONTRIBUTION TO THE COMMUNITY

##### Contribution to the ASMIRT Community

Please indicate how you have been involved with ASMIRT.

(Select all that apply)

- Volunteered with ASMIRT activities or committees
- Presented at an ASMIRT event, conference, or webinar
- Submitted a poster for an ASMIRT conference

- Serving/served as a student ambassador
- Involved with my State Branch on the Student Committee
- Attended my State Branch meetings
- Attended an ASMIRT event, conference, webinar (either in person or online)
- Organised or supported CPD activities or events
- Attended an ASMIRT conference
- Attended an ASMIRT webinar or online event
- Wrote an article for the ASMIRT Spectrum magazine
- Participated in ASMIRT networking or CPD events
- I have not yet been involved with ASMIRT

#### **Contribution to the Wider Community**

Have you participated in volunteering or community service activities outside of ASMIRT?

- Yes, I am actively involved in regular volunteering or community service
- No, I have not been involved in community service

#### **DOCUMENT UPLOAD**

Brief current Curriculum Vitae (CV) (maximum 2 pages)

Student academic record that provides evidence of final year university enrolment

Relevant Documents / Supporting Evidence

- For prospective placements, please attach quotes or estimated costs where available.
- For retrospective placements, please attach relevant invoices or receipts.

#### **CONFIDENTIALITY STATEMENT**

All information provided in this application will be treated as strictly confidential and will only be used for the purpose of assessing eligibility for the ASMIRT Clinical Placement Grant. Your personal details and responses will be accessed only by authorised ASMIRT staff and relevant selection committee members. No identifying information will be shared publicly without your consent. By submitting this application, you agree to these terms.

#### **PERSONAL DECLARATION**

I hereby declare that the information I have provided in this application is accurate to the best of my knowledge and agree to the terms and conditions. I understand that providing false or misleading information may result in my application being denied.

Signature:

(typing your name to signify agreement is considered a valid electronic signature)