FELLOWSHIP BY TRAINING PROGRAM

Application Guide

APPLICATION PROCESS

The application process has four stages:
1. Complete the application form and submit it along with the administration fee.
2. When requested, provide additional evidence or information on residency/visa, PhD studies and experience.
3. Application is reviewed by the Program team and accepted for interview or declined.
4. Applicants attend interview with the Program Convenor and Program Manager.

Interviews are competitive and based on merit, not all applicants who are interviewed will be accepted to the program.

If successful, a candidate is invited to join the program at the next available intake (July and January of each year).

APPLICATION FORM

The application form includes several questions about you, your studies and your understanding of health informatics. We have included these questions on the following pages so that you can prepare your application in advance.

We recommend that you consider your answers and write them out before opening the application form.

There is no mechanism to save your application and return to it later once you begin.

By submitting an application form and administration fee you are agreeing to the Application Terms and Conditions, available on page 4 of this guide and via the link below.

When you are ready to proceed, click on the following link, which will take you to the online form and payment process:

www.trybooking.com/BAPOT

ADDITIONAL INFORMATION

You will be asked to provide evidence of your residency/visa, qualifications, studies and experiences once your application form has been received. If you do not provide these when requested, your application cannot proceed.

CONTACT

Frances Cook
Fellowship Program Manager

Ph: +61 2 9850 2488
frances.cook@mq.edu.au

Application Questions

The following table lists all questions as they appear on the application form and the response expected by the Program.

NUMBER	QUESTION	ANSWER OPTIONS	RESPONSE REQUIRED
1 and 2	Are you an Australian or New Zealand citizen or permanent resident? Are you an international student with appropriate visas?	Yes/No	To be able to participate in the program you need to be able to study at an Australasian university and work in AU or NZ for at least 12 months after your PhD submission.
3	Qualifications Completed	Free Text Box.	List all the tertiary qualifications you have completed including: - Title of qualification gained - Institution - Year completed
4.	PhD Commencement Date	Date	Date you were enrolled in the PhD program.
5.	Current PhD Enrolment Details	Free Text Box.	List your PhD enrolment details including your university, the school you are enrolled through etc… Do not include the details of your study, this is included in question 7 below.
6.	PhD Research Domain	Tick Box	Select the research domains most closely aligned to your studies. You may select more than one.
7.	PhD Study Details	Free Text Box.	Provide details of your studies, for example; your topic, methodologies, technologies used, partners or trial sites, etc…
8.	PhD Supervisor Details	Free Text Box.	Name, position, title and at least one contact method for your principal supervisor.
9.	Anticipated PhD Submission Date	Date	Date that you are currently working towards submitting your thesis. This can be approximate.
10.	PhD Contribution to Enhancing Field of HI.	Free Text Box.	Provide details on how your PhD studies will enhance the field of health informatics and/or how the health informatics aspects of your PhD will advance your clinical field.
11	Area(s) of Expertise	Tick Box.	Select the areas you feel are your strongest areas of expertise, drawing on your PhD as well as other tertiary studies or clinical experience. You may select more than one.
12	Links to published works or projects.	Free Text	You may provide links to any published articles or books, or links to publicly available information about your PhD project or other health informatics

ACHI FELLOWSHIP BY TRAINING PROGRAM

The Australasian College of Health Informatics

			projects you have been primarily responsible for. This question is not compulsory, and your application can succeed without providing any links at all.
13	Work Experience.	Free Text	Provide summary details of any relevant health informatics or clinical employment. You will be asked to provide a full CV once you have submitted your application.
14	Area(s) of Interest in Health Informatics	Tick Box.	Select the areas of the field of Health Informatics that you are most interested in professionally. You may select more than one.
15	What is Health Informatics	Free Text	Provide a brief summary of your understanding of health informatics, explaining the broad concepts of the field as well as how it specifically applies to any areas of engineering, clinical, population health or business relevant to your work.
16	Reason(s) for applying to the Program	Free Text	Provide a brief summary of why you want to be a part of the FbT program. Include what you will personally/professionally gain from the experience, as well as what you will contribute to the field as a leader in Health Informatics.
17	Details of Referee	Free Text	Provide the name, title, organisation or university and at least one contact method for at least one and up to three professional or academic referees. You should list them in order you wish them to be contacted, as we may only contact one. We will confirm with you prior to contacting any references.
18	How did you hear about the program?	Tick Box.	Select how you heard about the FbT program to assist us in future promotion and reporting activities.
19	Declaration – The information above is correct.	Yes/No.	By selecting 'yes' you are confirming that you have provided information that is accurate to the best of your knowledge. If the information on your application is not correct you should amend the application prior to submitting or reconsider your application. If you select 'no' you will be contacted to discuss your application, but your application may not proceed.

ACHI FELLOWSHIP BY TRAINING PROGRAM

The Australasian College of Health Informatics

Application Terms and Conditions

1. The Application Administration Fee is compulsory and non-refundable in any circumstance, regardless of the outcome of the application. The Fee may change from time to time and will be as set out on our website.
2. Processing of credit card transactions is subject to any terms and conditions set by the issuer.
3. The ticket issued after payment of the Administration Fee is your tax invoice (Australasian College of Health Informatics [ABN 33764047507]).
4. This Application has been created and managed using the TryBooking site and is also subject to the Terms and Conditions of TryBooking.
5. Application fees are not redeemable for other services provided by us and are not transferrable to other applicants.
6. To complete an application additional information is required including but not limited to evidence of residency or visa, PhD studies and work experience. Failure to provide documents as requested will result in the application being declined.
7. There is no promise by Australasian College of Health Informatics that applicants will be enrolled in the program. The number of candidate placements may be limited, and placements are offered on a merit basis.
8. Information submitted as part of this Application will be held by Australasian College of Health Informatics in accordance with its Privacy Policy and the Relevant Australian Privacy Act 1988.
9. Information is submitted to Australasian College of Health Informatics through the third-party agent TryBooking. Information is subject to the TryBooking Privacy policies found here. ACHI will not be held responsible for privacy breaches or mishandling of information by TryBooking.
10. The Application process relies on the Internet to receive applications and payments and to deliver information via email. Access to the Internet by applicants is dependent on numerous factors which are beyond Australasian College of Health Informatics' authority and control and we will not be liable or responsible for an applicant's ability to access the Internet or communicate with us via the Internet.
11. We do not warrant that the Application form will be available for use at all times or at any particular time and may, without notice, suspend access to the Application form for any reason.
12. We shall not be liable for any failure by us to perform our obligations if such failure is due to circumstances beyond our reasonable control.
13. These terms and conditions are governed by the laws in force in Victoria, Australia. You agree to submit to the non-exclusive jurisdiction of the courts of Victoria, Australia and any courts which may hear appeals from those courts in respect of any proceedings in connection with these terms and conditions.
14. By submitting this Application, you agree that the information given in the application is true and correct and that no information that may have a bearing on the outcome of the application has been withheld.
15. By submitting this Application, you agree that you have read and agreed to these Terms and Conditions.

ACHI FELLOWSHIP BY TRAINING PROGRAM

The Australasian College of Health Informatics