

**PUBLIC HEALTH EDUCATION AND RESEARCH TRUST**  
Medicines Australia Vaccines Industry Group Immunisation Scholarship

**2010 Application Form**

Name: .....

Address: .....

Phone: .....

Email: .....

PHAA Membership Number: .....

Masters From: .....

Research area and topic: .....

Affiliated University/Employer .....

Ethical Clearance: .....

Total Budget: .....

Referees: .....

.....

.....

Signature .....

Date .....