

TRAVEL PRIZE APPLICATION FORM

Student Information	
Student Details	
Student ID	
First Name	
Family Name	
Travel information	
Purpose of travel (MDRP, Vocational Selective, Approved Clinical Elective placement, volunteering or conference)	
Location of travel (Australia or overseas)	
City of travel & dates of travel	
Have you travelled independently to this location before?	
Budget Outline	
Transport	
Flights (domestic, international)	
Travel Insurance	
Public Transport	
Accommodation	
Please provide all accommodation details for the duration of your proposed travel	
Research Specific	
Software	
Equipment	
Materials / Consumables	
Reference material / journal registration	
Other supplies / services	
Conference / Workshop / Program	
Registration	
Presentation materials	
Other living expenses	
Food, necessities	



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Other	

Budget Justification

Large empty area for budget justification.



MELBOURNE
MEDICAL
SCHOOL

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Personal Statement

Please provide a statement outlining how the proposed travel to a remote region of Australia or overseas destination will further your medical knowledge and life experience.