2024 DAWES SCHOLARSHIP

Honours Supervisors Report

To be completed by the applicant’s Honours Supervisor and emailed to Health.CALHNResearchGrants@sa.gov.au by **4 PM Monday 28 August 2023**

|  |  |
| --- | --- |
| **Applicant Name:** | Click here to enter text. |
| **Supervisor Name:**  | Click here to enter text. |
| **Department:**  | Click here to enter text. |
| **Institution:** | Click here to enter text. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. ***Is this student in the top of those you have supervised***
 | **5%** | **10%** | **25%** | **50%** |
| 1. ***Please comment on this students ability to work independently:***
 |
| Click here to enter text. |
| 1. ***Please comment on this students ability to understand background literature:***
 |
| Click here to enter text. |
| 1. ***Please comment on this students ability to communicate:***
 |
| Click here to enter text. |
| 1. ***Please add any other comments you think are relevant:***
 |
| Click here to enter text. |

## Supervisor's Signature

|  |  |
| --- | --- |
| Name: Click here to enter text. | Appointment/Title: Click here to enter text. |
| Tel: Click here to enter text. | Email: Click here to enter text. |
| Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:  |

**APPLICATIONS CLOSE 4PM Monday 28 August 2023**

#### For more information

|  |  |
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| E: Health.CALHNResearchGrants@sa.gov.au  | ADELAIDE SA 5000 |
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