

**NSW Health Sponsorship Application for the  
University of Newcastle's Master of Clinical Medicine (Leadership and  
Management) (M Clin Med)  
2012**

**NSW Health candidates seeking a sponsored position in the Master of Clinical Medicine (Leadership and Management) (M Clin Med) are required to complete and lodge a NSW Health sponsorship application with NSW Health.**

A completed NSW Health sponsorship application consists of:

- a) Completed and signed NSW Health sponsorship application form (**PART A – PART H**) with the following attachments:
  - A certified copy of either your birth certificate or passport or Australian citizenship certificate (**PART A**)
  - A copy of the curriculum vitae you submitted to the University of Newcastle with your M Clin Med application (**PART C**)
  - Two copies of the completed M Clin Med application that you submitted to the University of Newcastle, including all attachments (**PART G**)
- b) **PART A - D & F** of the form are to be completed electronically.
- c) **PART E** and **PART G** of the form require endorsement by the Local Health District Chief Executive and applicant sign-off respectively and therefore must be completed in hard copy.
- d) **Part H** of the form is to be completed (electronically or by hand) and submitted as part of your sponsorships application.
- e) Completed sponsorship applications are to be submitted in entirety by post to the Ministry of Health.

Applications for sponsorship will be processed through NSW Health with the support of Local Health Districts. **Incomplete applications will not be considered for sponsorship.**

**Lodging the NSW Health sponsorship application**

To lodge the NSW Health sponsorship application, send the original and one copy of the completed sponsorship application, including all attachments, by post to the Ministry of Health by 30 November 2011 to:

Catherine Ellis  
Statewide Education Policy  
Ministry of Health  
Locked Mail Bag 961  
North Sydney NSW 2059

Note that applications postmarked after the closing date will be considered if places remain available.

Candidates will receive email notification regarding the outcome of their application.

If you need assistance in completing the following application please contact:

Dr Cathie Hull – Ministry of Health  
Telephone (02) 9391 9532 Email: [chull@doh.health.nsw.gov.au](mailto:chull@doh.health.nsw.gov.au)  
or  
Catherine Ellis– Ministry of Health  
Telephone (02) 9391 9798 Email: [celli@doh.health.nsw.gov.au](mailto:celli@doh.health.nsw.gov.au)

**Before beginning the NSW Health sponsorship application form:**

1. All applicants must apply for entry to the M Clin Med through the Universities Admission Centre (UAC).
2. All applicants must also supply specific information direct to the University of Newcastle. A copy of the application that you submit directly to the University of Newcastle, including all attachments, is required as part of the NSW Health sponsorship application form (**PART G**). Application information for the University of Newcastle is available at: <http://www.newcastle.edu.au/apply-mcm>  
Note that applicants must be accepted to the Master of Clinical Medicine (Leadership and Management) to be considered for NSW Health sponsorship.
3. Read the NSW Health Sponsorship Guidelines to check your eligibility for sponsorship and review the sponsorship terms and conditions. The Guidelines are available at: [http://www.health.nsw.gov.au/training/hospitalist/nsw\\_health\\_sponsorship.asp](http://www.health.nsw.gov.au/training/hospitalist/nsw_health_sponsorship.asp)
4. Save the sponsorship application form to your computer before you start to fill it in.
5. Complete **PART A - D & F** of the form electronically. **PART E** and **PART G** of the form require signatures and endorsement and therefore must be completed in hard copy.
6. Ensure you complete **PART H** of the sponsorship form, the NSW Health sponsorship check list, before submitting your completed sponsorship application to NSW Health.  
**Incomplete applications will not be considered for sponsorship.**

## NSW Health Sponsorship Application Form 2012

<b>PART A – Contact information</b>	
First Name	
Last name	
Date of birth (dd/mm/yyyy)	
Gender	<input type="checkbox"/> Female <span style="margin-left: 150px;"><input type="checkbox"/> Male</span>
Citizenship status <small>(Note: Only permanent residents and Australian citizens are eligible for NSW Health sponsorship).</small>	<input type="checkbox"/> Australian citizen <span style="margin-left: 100px;"><input type="checkbox"/> Permanent resident</span>
<b>Please attach</b> a certified copy of either your birth certificate or passport or Australian citizenship certificate	
	<input type="checkbox"/> Yes <span style="margin-left: 150px;"><input type="checkbox"/> No</span>
Aboriginal / Torres Strait Islander	
Medical Board of Australia registration number	
Postal address	
	Suburb: <span style="margin-left: 100px;">State:</span> <span style="margin-left: 100px;">Postcode:</span>
Daytime telephone number	(    )
Mobile Number	
Email address	

**PART B – Current employment**

NSW Health will confirm your employment details with your employing hospital/facility before awarding sponsorship.

Employing Local Health District	_____
Name of hospital/facility	_____
Date commenced (dd/mm/yyyy)	_____
Hospital/facility contact number	(    ) _____
Job title	_____
Employee number	_____
If employed part time, what is your percentage of a full time role employed, (eg 0.5FTE if half time)	_____
Are you enrolled in a specialist training college?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	_____

**PART C – Curriculum vitae**

**Please attach:** a copy of the curriculum vitae that you submitted with your University of Newcastle application.

**PART D – Personal statement**

Please answer the following questions in 300 words or less, in the space provided.

1. How do you think the Master of Clinical Medicine (Leadership and Management) will contribute to your career goals, outlining what you particularly want to learn?

2. How do you see the Master of Clinical Medicine (Leadership and Management) contributing to your workplace/hospital?

**PART E - Chief Executive Local Health District (or delegate) endorsement**

Name	_____		
Title	_____		
Local Health District	_____		
Postal address	_____		
	Suburb:	Postcode:	_____
Email	_____		
Telephone	( ) _____		
Facsimile	( ) _____		
<p>I support the applicant's attendance and participation as a sponsored candidate in the Masters program. I understand the time and commitment required for the applicant to successfully complete the courses and assessment tasks and have confidence in his/her ability to complete the program. I agree that the annual education grant will be spent in accordance with the NSW Health Sponsorship Guidelines (<a href="http://www.health.nsw.gov.au/training/hospitalist/nsw_health_sponsorship.asp">http://www.health.nsw.gov.au/training/hospitalist/nsw_health_sponsorship.asp</a>).</p>			
Signature, Chief Executive/delegate	_____		
Date	_____		

**PART F - Referee details**

Please provide the name and contact details of two referees. One referee must be a current or past supervisor. NSW Health may contact your referees about your application. It is recommended that your referees are familiar with your work and your ability to perform in the Masters program.

Please note that the referees you nominate here may be the same as the Clinical Referees you nominated on your Master of Clinical Medicine (Leadership and Management) application to the University of Newcastle.

<b>Referee 1</b>			
Name	_____		
Title	_____		
Local Health District	_____		
Health facility/Hospital	_____		
Postal Address	_____		
	Suburb:	State:	Postcode: _____
Email	_____		
Telephone	( ) _____		
Facsimile	( ) _____		
<b>Referee 2</b>			
Name	_____		
Title	_____		
Local Health District	_____		
Health facility/Hospital	_____		
Postal Address	_____		
	Suburb:	State:	Postcode: _____
Email	_____		
Telephone	( ) _____		
Facsimile	( ) _____		

### **PART G - Applicant declaration and sign-off**

I have read the University of Newcastle's Masters information and the NSW Health Sponsorship Guidelines and understand my sponsorship and study requirements. I have not made other undertakings which would conflict with my ability to successfully complete the Masters program.

I agree that NSW Health is able to access the information I have provided to UAC and the University of Newcastle in relation to the Master of Clinical Medicine (Leadership and Management), including application information and any supporting documentation. I understand that this information will be used by NSW Health to further assess my suitability for a NSW Health sponsored position.

I also agree to allow NSW Health to confirm the employment details I have provided in my application with my employing hospital/facility.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Please attach:** a complete copy of the Master of Clinical Medicine (Leadership and Management) application that you submitted to the University of Newcastle, including all attachments.

### **PART H: Finalising and lodging your NSW Health Sponsorship Application**

Please ensure that you have completed all steps of the NSW Health sponsorship checklist before sending your sponsorship application to NSW Health. **Incomplete applications will not be considered for sponsorship.**

NSW Health sponsorship check list:

- Ensure you have read the [NSW Health Sponsorship Guidelines \(www.health.nsw.gov.au/training/hospitalist/nsw\\_health\\_sponsorship.asp\)](http://www.health.nsw.gov.au/training/hospitalist/nsw_health_sponsorship.asp)
- PART A - D & F** of the sponsorship form are completed electronically
- Print the entire application form (**PART A – PART H**)
- Ensure signature sections / endorsements (**PART E and PART G**) are complete
- Attach a certified copy of either your birth certificate or passport or Australian citizenship certificate (**PART A**)
- Attach a copy of your curriculum vitae (**PART C**)
- Attach a complete copy of the Master of Clinical Medicine (Leadership and Management) application that you submitted to the University of Newcastle, including all attachments (**PART G**)
- Make 2 copies of your completed sponsorship application, including all required attachments
- Send the original and one copy of the completed sponsorship application, including all attachments, to the Ministry of Health by 30 November 2011 to:

Catherine Ellis  
Statewide Education Policy  
Ministry of Health  
Locked Mail Bag 961  
North Sydney NSW 2059

The copies forwarded to the Ministry of Health are final and cannot be amended. Keep the third copy for yourself.

Note that applications postmarked after the closing date will be considered if places remain available.