

BEGINNING OF YEAR REPORT

New scholarship recipients please note: You have recently been notified that you have been awarded a scholarship in the Aboriginal and Torres Strait Islander Pharmacy Scholarship Scheme. As a condition of receiving the scholarship, you must provide a Beginning of Year Report and supporting documents each year. Scholarship payments will commence when the Pharmacy Programs Administrator has accepted and approved the report and supporting documents.

Scholar Personal Details

Name:

Given Name	Family Name
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Current address (physical street address):

Please provide details of how you can be contacted throughout the academic year; PO Boxes not accepted.

Address		
Suburb	State	Postcode

Phone Number:**Email Address:**

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If your address (physical street address), email address or phone number changes throughout the year, please ensure you contact the PPA Support Centre to advise and the team will instruct you on how to update these on the [Pharmacy Programs Administrator Portal](#).

Course Details

Name of University:**Full Name of Pharmacy Course:**

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Year of Study: (1st, 2nd, 3rd or 4th)**Expected Completion Date**

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Bank Account Details

If your bank details have changed, please update these on the [Pharmacy Programs Administrator Portal](#) or call the Support Centre.

ABORIGINAL AND TORRES STRAIT ISLANDER PHARMACY SCHOLARSHIP SCHEME

Mentor Details

Scholars are reminded that:

- Mentor eligibility is assessed against the information provided below unless previous grandfathering arrangements have been approved. Mentor eligibility requirements can be found in the [Rural Pharmacy Scholarship Mentor Scheme Program Rules](#).
- Scholars are required to advise the PPA within 14 days of decisions to change mentors during an active scholarship/academic year.

Name:

Given Name	Family Name
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Current workplace address (physical street address):

Use the mentor's current physical workplace address; PO Boxes not accepted.

Address		
Suburb	State	Postcode

Phone Number:

Email Address:

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Note: If there is a change to the details listed for your mentor above, such as their workplace address (physical street address), email address or phone number changes throughout the year, please ensure you contact the PPA Support Centre to advise and the team will provide your mentor with instructions on how to update these on the [Pharmacy Programs Administrator Portal](#).

Please submit the following documents as part of your Beginning of Year requirements:

First-time scholarship recipients

- A Learning Plan (to be completed and signed by the student and mentor; a template can be found at <https://www.ppaonline.com.au>)
- Proof of Rural Health Club membership.

All other scholarship recipients

- A Learning Plan (to be completed and signed by the student and mentor; a template can be found at <https://www.ppaonline.com.au>)
- Proof of full-time enrolment in your pharmacy course
- A copy of your academic results from the previous year
- A signed copy of the Annual Scholarship Agreement (available at <https://www.ppaonline.com.au>)
- Proof of your Rural Health Club membership.

This program is funded by the Australian Government.



CONTACT THE SUPPORT CENTRE: 1800 951 285 | support@ppaonline.com.au