



Rural and Remote Pharmacy Placement Allowance Scheme

Rural and Remote Pharmacist Workforce Development Program

Application Form

The Placement Allowance Scheme is an initiative of the Rural and Remote Pharmacy Workforce Development Program (RRPWDP). The RRPWDP was established in 1999 in recognition of the key role pharmacists play in maintaining the health of all Australians, particularly in rural and remote Australia. The aim of RRPWDP is to implement strategies to strengthen and support the rural and remote pharmacy workforce in Australia.

The Placement Allowance Scheme is funded by the Commonwealth Department of Health and Aged Care (CDHAC) under the RRPWDP and is managed by the Pharmacy Guild of Australia (the Guild) under an agreement between the Guild and CDHAC.

The Placement Allowance Scheme provides financial support to encourage and enable undergraduate pharmacy degree programs at Australian Universities to deliver compulsory student placements in rural and remote communities. The Scheme aims to facilitate positive placement experiences for final year pharmacy students in rural and remote communities, encouraging students to return to rural or remote practice on graduation.

Please read the accompanying guidelines and eligibility criteria before completing this application form.

Applicant Information

Mr/Mrs/Ms/
Miss/Other Surname:

Given Name: Other Names:

Male/Female: Date of Birth:

Home Address:
..... State: Postcode:

Mailing Address:
..... State: Postcode:

Are you an Australian citizen, permanent resident
or have permanent resident status Yes/No

Are you of Aboriginal or Torres Strait Islander descent? Yes/No

Are you from a non-English speaking background? Yes/No

Are you a person with a disability? Yes/No

As part of the selection process, the Selection Committee may require more information
about your application. How would you prefer us to contact you regarding this
application?

By mail to my home address

By mail to another address (shown below)

Address:
..... State: Postcode:

By telephone or fax

Phone: Fax:

By e-mail

E-mail address:

At which University are you enrolled? :

Have you been awarded any other allowance, grant or prize to assist you to undertake
University studies? Yes/No
(If yes, please provide name and value of Allowance, grant or prize)

Allowance/Grant/Prize Name:
..... Value:.....

Allowance/Grant/Prize Name:
..... Value:.....

