

# Sydney Royal Wine Professional Development Scholarship 2025

## Form Preview

## Welcome

The Sydney Royal Wine Show is one of the most prestigious wine shows in Australia, annually attracting over 2,300 entries from more than 350 producers across Australia.

The RAS Wine Committee together with the RAS Foundation offers wine enthusiasts the opportunity to apply for a **Sydney Royal Wine Professional Development Scholarship**. This scholarship is available to support those already working in the wine industry who wish to further their knowledge and skills.

Applicants can apply for a **Sydney Royal Wine Professional Development Scholarship** to fund courses such as:

- Australian Wine Research Institute's (AWRI):
  - Advanced Wine Assessment Course (AWAC).
  - Advanced Viticulture course.
- Wine & Spirit Education Trust (WSET) courses:
  - Level 1, 2, 3 or 4 in Wines.
  - Level 1, 2 or 3 in Spirits.
  - Level 1 or 3 in Sake.
- Wine Service (including Sommelier) courses.

### Eligibility:

- Applicants must be an Australian citizen or a permanent resident.
- Applicants must be employed in the Australian Wine Industry or engaged in study in a related course.
- Applicants should be available to attend the Sydney Royal Wine Show (July 2025).
- Applicants must not have previously received a Sydney Royal Professional Development Scholarship.

### Value of Scholarship:

Scholarships of up to \$6,000 are available depending on the professional development course chosen.

### Selection criteria:

- Proven interest in and desire to actively contribute to the Australian Wine Industry.
- Financial need.
- Proven need for this particular course of study, providing justification of how it will benefit their future career in wine.

**Applications Open:** July 2024

**Applications Close:** September 2024

**Scholars Announced:** November 2024

**Further Information:** Contact the RAS Foundation on (02) 9704 1234 or via email [foundation@rasf.org.au](mailto:foundation@rasf.org.au)

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Applicants for this scholarship are also welcome to apply for our [Sydney Royal Wine Study Scholarship](#) as well, if they comply with the criteria. Information can be found in the Scholarships section of the RAS Foundation website.

## Your Details

\* indicates a required field

### Your Name \*

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

### Email Address: \*

Must be an email address.

### Date of Birth \*

Must be a date.

### Age as at 31 January 2025

### Gender \*

### Postal Address \*

Address

  

Suburb State Postcode

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Must be an Australian postcode.

### Contact Phone Number \*

Must be an Australian phone number.

### Alternate Phone Number

Must be an Australian phone number.

### Hometown \*

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Place you grew up in, resided the longest time?

**Are you an Australian Citizen or Permanent Resident? \***

Yes  No

**Are you of Aboriginal or Torres Strait Islander descent? \***

Yes  No

**How did you hear about the Sydney Royal Wine Professional Development Scholarship? \***

- |   |   |
|---|---|
| <input type="checkbox"/> RAS Member                   | <input type="checkbox"/> Newspaper or Magazine Article                      |
| <input type="checkbox"/> RAS Social Media             | <input type="checkbox"/> Through Industry Networks                          |
| <input type="checkbox"/> RAS Direct Email             | <input type="checkbox"/> Previous RAS Foundation Wine Scholarship Applicant |
| <input type="checkbox"/> RAS Foundation Direct Email  | <input type="checkbox"/> University/TAFE/College                            |
| <input type="checkbox"/> RAS Foundation / RAS Website | <input type="checkbox"/> Other: <input type="text"/>                        |

## Scholarship Information & Supporting Statements

\* indicates a required field

**Name of the course you intend to study, course provider and location \***

**What is the cost of your chosen wine professional development course? \***

**Please explain your interest in undertaking your chosen wine professional development course? \***

Word count:

Must be no more than 200 words.

**How will this scholarship enable you to play a greater role in the Australian Wine Industry in the future? \***

Word count:

Must be no more than 200 words.

**Please explain your financial circumstances and why you consider that you have financial need? \***

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Word count:  
Must be no more than 200 words.

**Please explain your voluntary involvement in the Australian Wine Industry to date? \***

Word count:  
Must be no more than 200 words.

**Please describe your experience as a wine steward. If you have none, please write 'N/A'. \***

Max 200 words - dot points are acceptable.

**Please describe your experience as a wine judge. If you have none, please write 'N/A'**

Max 200 words - dot points are acceptable.

**Is there anything else you would like to tell us about yourself, your circumstances or your career goals and aspirations? \***

Word count:  
Must be no more than 200 words.

## Resume

**Please attach your resume (maximum of 2 pages). Note only MS Word (.doc) and Adobe PDF Formats are accepted. \***

Attach a file:

Documents must be no larger than 2 pages.

## Referee

\* indicates a required field

# Sydney Royal Wine Professional Development Scholarship 2025

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Please provide the name and contact details of a referee who may be contacted by the RAS Foundation, if necessary, for a reference regarding your suitability for a Sydney Royal Wine Professional Development Scholarship. By providing this information, you consent to the RAS Foundation contacting the referee. You are not required to provide a written reference.

**Name of Referee \***

**Position title and company name (if applicable)**

**Contact number \***

Must be an Australian phone number.

**Email \***

Must be an email address.

**Relationship to Applicant \***

Example: Employer, mentor etc

## Declaration

### Declaration by Applicant

I wish to be considered for a RAS Foundation Sydney Royal Wine Professional Development Scholarship as specified above.

I authorise the RAS Foundation to contact my referee as outlined above, and acknowledge that the RAS Foundation reserves the right to vary or reverse any decision regarding a scholarship awarded on the basis of incorrect or incomplete information and cease further scholarship payments.

I agree that should I be successful in gaining a scholarship, the RAS Foundation may request my assistance with promotion of these scholarships in future years.

**Agree to Declaration**

Yes

### Privacy Act Statement

Information, personal or otherwise, provided by you as the applicant on this Application Form, is to be used for the purpose of processing your application and any associated activity relating to the application, for RAS Foundation and RAS promotions including media activities and for archival purposes. The information will remain confidential at all times, except for disclosure which you have consented to or which is required by law. You may

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request access to your information and request that it be corrected at any time or the facility cancelled by advising the Privacy Officer on 9704 1111 or by writing to The Privacy Officer, RAS Foundation, 1 Showground Road, Sydney Olympic Park, NSW 2127.

By submitting this application, you agree to the Declaration and Privacy Act Statement above.

**I agree to the declaration above and the Privacy Statment of this website.**

Yes

### Parent/Guardian Consent (for Applicants under 18 years of age)

As the parent/guardian for the under 18 applicant completing this form, by ticking the box at the end of this paragraph, I agree and provide permission for my child to make this application. I understand that his/her details, including some private information collected in this form, will be used by the RAS and the RAS Foundation to process the application, including contacting institutions and referees to discuss my child. I agree that if my child's application is successful, then his/her information may also be communicated or published (including the internet) to promote the RAS Foundation and/or the RAS. I also agree to be contacted directly on the phone number provided, in the event that the RAS Foundation or the RAS have future scholarships or other projects that my child may benefit from being involved in.

**I agree to provide consent.**

Yes

**Parent/Guardian Name**

**Contact phone number**