#### Welcome

The Sydney Royal Wine Show, established in 1826, is one of the most prestigious wine shows in Australia, annually attracting over 2300 entries from more than 350 wine producers across Australia.

The Sydney Royal Wine Scholarship was created in honour of Graham Thorp to acknowledge his outstanding contribution as former Chairman of the RAS Wine Committee. The Scholarship is awarded in partnership with the RAS Foundation (RASF).

**Purpose:** To encourage students who are passionate about wine and committed to forging careers that will contribute to the Australian Wine Industry. Areas of study can include, but are not limited to:

- Agriculture,
- Science.
- Horticulture,
- Viticulture,
- Oenology,
- Marketing,
- Lab Technician,
- Journalism or
- Hospitality studies.

Value: Scholarships of up to \$6000 are available.

#### **Eligibility Guidelines:**

- Applicants must be an Australia citizen or permanent resident.
- Applicants must be under 30 years of age.
- Open to students applying for, or holding admission to, an accredited course (College, VET including TAFE, University or Private Provider) with relevance to the Australian Wine Industry.
- Applicants should be available to attend the Sydney Royal Wine Show.
- Applicants applying to attend the Australian Wine Research Institute's Advanced Wine Assessment Course should apply for a Sydney Royal Wine Professional Development Scholarship.

#### **Selection Criteria:**

- Proven interest in the Australian Wine Industry
- Desire to actively contribute to the Australian Wine Industry
- Financial need
- Satisfactory academic merit during the HSC or equivalent or prior year/s of college, university or TAFE study, or proven employment history for applicants not recently engaged in study.

**Applications Open:** 1 August 2022 **Application Close:** 24 October 2022

Scholarships Announced: December 2022

**Scholarship Funds Awarded:** April 2023for use in the 2023 academic year.

**Further information:** Contact the RASF on (02) 9704 1234 or via email foundation@rasf.org.au.

#### Your Details

\* indicates a required field

| Your Name *                                                      | Title             | First Name         |         | Last Name  |
|------------------------------------------------------------------|-------------------|--------------------|---------|------------|
|                                                                  |                   |                    |         |            |
| Email Address *                                                  |                   |                    |         |            |
| Date of Birth *                                                  |                   |                    |         |            |
| Age as at 31 January<br>2023 *                                   |                   |                    |         |            |
| Gender *                                                         |                   |                    |         |            |
| Postal Address *                                                 | Address Suburb St | ate Postcode       |         |            |
| Contact Phone Number *                                           | Include area      | code               |         |            |
| Alternate Phone Number                                           |                   |                    |         |            |
| Hometown *                                                       | Place you firs    | t resided or spent | the mos | t time in. |
| Are you an Australian<br>Citizen or Permanent<br>Resident? *     | ○ Yes             |                    | O No    |            |
| Are you of Aboriginal or<br>Torres Strait Islander<br>descent? * | ○ Yes             |                    | ○ No    |            |

| How did you hear about the Sydney Royal Wine Study Scholarship? *                      | ☐ School / University / College / TAFE Lecturer / Website                                                                      | □ RAS Member |                                                |  |
|----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|--------------|------------------------------------------------|--|
|                                                                                        | <ul> <li>□ Previous RASF Wine</li> <li>Scholarship Recipient /</li> <li>Applicant</li> <li>□ Newspaper Advertisemen</li> </ul> | □ RAS Fa     |                                                |  |
|                                                                                        | or Article ☐ Through Industry                                                                                                  | □ RAS Eı     |                                                |  |
|                                                                                        | Networks □ RASF Website                                                                                                        | ☐ Other:     |                                                |  |
|                                                                                        | *Please select maximum of two                                                                                                  |              |                                                |  |
| Study Details                                                                          |                                                                                                                                |              |                                                |  |
| * indicates a required field                                                           |                                                                                                                                |              |                                                |  |
| marcaces a regamen mera                                                                |                                                                                                                                |              |                                                |  |
| List the full name of<br>the course you will be<br>undertaking in 2022? *              |                                                                                                                                |              |                                                |  |
| Name the College, TAFE,                                                                |                                                                                                                                |              |                                                |  |
| University or Course<br>Provider at which you<br>will be undertaking this<br>course? * |                                                                                                                                |              |                                                |  |
| Campus Location? *                                                                     |                                                                                                                                |              |                                                |  |
| In 2022 which year will you be in? *                                                   | <ul><li>○ 1st year</li><li>○ 2nd year</li><li>○ 5th year</li></ul>                                                             |              | <ul><li>Post Graduate</li><li>Other:</li></ul> |  |
|                                                                                        | ○ 3rd year ○ 6th ye                                                                                                            | ear          |                                                |  |
| What is your proposed study load in 2022? *                                            | ○ Full-time ○ Part-time                                                                                                        | Other:       |                                                |  |
|                                                                                        | By providing this information contacting the institution in application (if required).                                         |              |                                                |  |

#### Report & Resume

#### **Academic Transcript and Reports**

Please provide a transcript of your most recent academic results if currently studying at college, TAFE or university.

If you are at high school, please provide your most recent and brief school report. (summary only 1-2 pages).

We require a brief resume from all applicants.

| Attach your academic transc<br>formats are allowed.<br>Attach a file:                     | ript/report. I                                                                   | Note only MS W    | ord (.doc) and Adobe                                                               | PDF  |
|-------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|-------------------|------------------------------------------------------------------------------------|------|
| A maximum of 2 pages only.                                                                |                                                                                  |                   |                                                                                    |      |
| Attach your resume (maximu PDF Formats are allowed. * Attach a file:                      | ım of 2 page                                                                     | s). Note only M   | S Word (.doc) and Ad                                                               | lobe |
| A maximum of 2 pages                                                                      |                                                                                  |                   |                                                                                    |      |
| Scholarship Information                                                                   | n                                                                                |                   |                                                                                    |      |
| * indicates a required field                                                              |                                                                                  |                   |                                                                                    |      |
| Are you currently a recipient of any of the following? *                                  | <ul><li>Youth All</li><li>Austudy</li><li>Abstudy</li><li>please state</li></ul> | owance            | <ul><li>Other Government</li><li>Assistance</li><li>Other:</li></ul>               |      |
| If you received a<br>Centrelink benefit,<br>please indicate the<br>classification.        | ☐ Independe☐ Depende☐ Living at                                                  | ent               |                                                                                    |      |
| Explain your financial circumstances and why you consider that you have financial need? * | distance you                                                                     | live from campus, | s - This can include issues<br>your living arrangements,<br>ndents in your family. |      |

#### **Statements**

\* indicates a required field

Please respond to each question below in no more than 250 words:

| Why are you studying this course? *                                                                                                                                                                                                                                                                                           |                                     |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--|--|
|                                                                                                                                                                                                                                                                                                                               | Word count:<br>250 word limit       |  |  |
|                                                                                                                                                                                                                                                                                                                               | Word count:<br>250 word limit       |  |  |
| Please explain your voluntary involvement in the Australian Wine Industry to date. *                                                                                                                                                                                                                                          |                                     |  |  |
|                                                                                                                                                                                                                                                                                                                               | Word count:<br>250 word limit       |  |  |
| Is there anything else<br>you would like to tell<br>us about yourself,                                                                                                                                                                                                                                                        |                                     |  |  |
|                                                                                                                                                                                                                                                                                                                               | Word count:<br>250 word limit       |  |  |
| Referee                                                                                                                                                                                                                                                                                                                       |                                     |  |  |
| Please provide the names and contact details of a referee who may be contacted by the RASF, if necessary, for a reference regarding your suitability for a Sydney Royal Wine Scholarship. By providing this information you consent to the RASF contacting the referee.  You are not required to provide a written reference. |                                     |  |  |
| Name of Referee:                                                                                                                                                                                                                                                                                                              |                                     |  |  |
| Position Title and<br>Company Name (if<br>applicable)                                                                                                                                                                                                                                                                         |                                     |  |  |
| Daytime contact number                                                                                                                                                                                                                                                                                                        |                                     |  |  |
| Email Address                                                                                                                                                                                                                                                                                                                 |                                     |  |  |
| Relationship to<br>Applicant                                                                                                                                                                                                                                                                                                  | eg. Employer, Colleague, Mentor etc |  |  |

#### Declaration

\* indicates a required field

The selection panel intends to notify the scholarship recipients by December 2022. The offer of a scholarship will be conditional upon receipt of all information outlined above and completion of standard University / TAFE / College admission procedures.

#### Declaration by Applicant

I wish to be considered for an RAS Foundation (RASF) Sydney Royal Wine Scholarship, as specified above.

I authorise the RASF to contact my referee as outlined above, and acknowledge that the RASF 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 RASF may request my assistance with promotion of these scholarships in future years.

| Agree to declaration *                                                                                                                                                                                                                           | Yes                                                                                                                                                                                                                                                                                                                                                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Privacy Act Statement                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Form is to be used for the purpose activity relating to the application and for archival purposes. The inf disclosure which you have consert to your information and request to by advising the Privacy Officer on Showground Road, Sydney Olymp | e, provided by you as the applicant on this Application e of processing your application and any associated for RASF and RAS promotions including media activities formation will remain confidential at all times except for fitted to or which is required by law. You may request access that it be corrected at any time or the facility cancelled for any time or the Privacy Officer, RASF, 1 for Park, NSW 2127. |
| above.                                                                                                                                                                                                                                           | a agree to the Declaration and the Privacy Act Statement                                                                                                                                                                                                                                                                                                                                                                |
| I agree to the declaration above and the Privacy Statement of this website *                                                                                                                                                                     | O Yes                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Parent/Guardian Consent                                                                                                                                                                                                                          | (for Applicants under 18 years old)                                                                                                                                                                                                                                                                                                                                                                                     |
| Parent/Guardian name                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Contact phone number                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                         |
|                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                         |

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 RASF 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 RASF and/or the RAS. I also agree to be contacted directly on the phone number provided in the event that the RASF or the RAS have future scholarships or other projects that my child may benefit from being involved in.

I agree to provide consent

Yes