



Nursing and Midwifery Postgraduate Scholarship Scheme

SUPERVISOR RECOMMENDATION

Recommendation supporting your scholarship application is to be obtained from your current Nursing/Midwifery Supervisor. Please upload this completed form to online scholarship application.

Applicant's name:	
Current position and designation:	
Name of course:	
Name of education provider:	

Supervisor's comments and recommendation:

As the Supervisor for the applicant above, this scholarship application to undertake the above-mentioned course is supported: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Comments (<i>optional</i>): *If the application is <u>not</u> supported, please provide the reason.	
Supervisor's name:	
Position:	
Phone:	
Email:	
Signature:	
Date:	