**MDHS Host academic details**

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| Applicant name: | |
| Which MDHS School/ Department/ Centre/Institute do you propose to undertake the McKenzie Fellowship in?  Refer: <https://mdhs.unimelb.edu.au/research/overview-of-research-in-the-faculty>  If it’s a joint faculty application, applicant must select the lead faculty. | School:  Department: |
| Name of your MDHS academic contact?  Make sure you have an academic contact within proposed host department who is willing support your application.  Note: this is also a requirement of the full application. |  |
| Do you intend to perform any portion of the research project within an affiliated institute of the University?  If yes, please indicate the affiliated institute, the proportion of time you intend to spend there, and an academic contact within the institute. | YES  TBA % of time  Name of academic contact there |
| Per FAQ points 7, 8 &9 – Taking up fellowship at UoM affiliated MDHS Medical Research Institute or Department or if you belong to an affiliated medical institute, in summary:  *In order to take up the fellowship, you would need to be employed by a UoM budget unit Department or School. The fellow cannot be directly employed by the affiliated research institute.* | If yes, please obtain proposed Head of Department support and signature  (If No, skip this requirement) |
| Head of Department endorsement  *I hereby endorse this EOI and if it’s successful, agree to the recipient’s 1.0FTE employment through UoM budget unit department or school.* |  |
| HoD Name | Date |
| HoD signature | |

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