WC-SCATSI Application Form
Form Preview

Application - Wound Care: Short Course Scholarship (Aboriginal and Torres Strait Islander Health Care Worker and Practitioner)

Scholarship Name

WC-SCATSI

Important Dates

Applications open: 1 May 2026Closing date: Applications close once all scholarships places are filledScholars notified: Within 4 weeks of application

Guidelines

The Wound Care - Short Course Scholarship is an Australian Government Department of Health and Aged Care initiative. ACN is proud to work with the Australian Government and the Department of Health and Aged Care as the fund administrator for these scholarships. The purpose of the Wound Care Scholarships is to support nurses and Aboriginal and Torres Strait Islander Health Workers and Practitioners to undertake formal education and short courses to improve best practice wound management in primary care settings. This grant opportunity is to provide scholarships for short courses in wound care. The government is seeking to improve nurses' and Aboriginal and Torres Strait Islander Health Workers' capability across Australia, including rural and remote locations.

The scholarship provides funding for Aboriginal and Torres Strait Islander health workers and practitioners to undertake a short course in wound care between 1 July 2026 - 30 June 2027.

ELIGIBILITY CRITERIA

To be eligible to apply applicants must be:

- An Australian Citizen or permanent resident of Australia.
- Be currently employed in a primary care setting as an Aboriginal and Torres Strait Islander Health Worker or Health Practitioner.

VALUE OF THE SCHOLARSHIP

The scholarship is valued up to $1,500 and will cover the following:

- Course fees
- Travel and accommodation - if required to relocate to attend the course

Please note that the applications will remain open until all scholarship places are filled. Prospective applicants are encouraged to submit their applications promptly to ensure consideration.

APPLICATION PROCESS

Scholarships will be awarded on the basis of your responses to the questions in this application form. Please note the scholarships are very competitive and there may be more applications than there are available scholarships. Therefore, not all eligible applicants will receive a scholarship.

This scholarship is awarded for ONE activity only. Do not list multiple activities in your application.

Applications must be submitted to ACN on or before the advertised closing date.

ACN and the Australian Government Department of Health and Aged Care reserve the right to suspend, amend or vary the guidelines, the scholarship application process or any part thereof.

IMPORTANT INFORMATION

Only the information you provide on this application form will be considered.

Applicants must answer all questions in the application form as incomplete applications will not be considered for selection.

This application form is to apply for the scholarship scheme and is not an application to an educational institution. You must contact an educational institution for details on how to organise your enrolment in the chosen short course.

SCHOLARSHIP AGREEMENT

Scholarship recipients will be provided with a copy of the terms and conditions of the Scholarship Scheme prior to the commencement of their scholarship, and will be required to sign a Scholarship Acceptance Form.

If your application is successful you will be requested to provide copies of all of the following documents:

- Australian Citizenship or Permanent Residency
- Name change (if applicable)
- Current registration or qualification course enrolment
- Bank statement

Scholarship payments will not commence until the signed Scholarship Acceptance Form, confirmation of enrolment, and all other requested documentation is received by ACN. Failing to provide all required documents will result in the withdrawal of the offer of a scholarship place.

Frequently asked questions

How do I navigate through the application?

Use the menu on the left to move through the questions.

Do I have to complete the application in one sitting?

No, you are able to save information entered in the application and return to it without submitting it. Just remember to keep a record of your username and password.

How do I save the information I have already entered?

Clicking on the menu or ‘save and continue’ button will save your information.

What does the asterisk (*) mean?

Questions with an asterisk must be completed.

Are late applications accepted?

Please note that applications will remain open until all scholarship places are filled. Prospective applicants are encouraged to submit their applications promptly to ensure consideration.

Am I able to make any changes once I have submitted my application?

No, you cannot make any changes once an application is submitted. If your contact details change prior to notification, please email the new details to the Scholarships Team at scholarships@acn.edu.au.

When will I be notified if I am successful?

You will be advised the outcome of your application within 4 weeks of submission.

What documents do I need to supply?

If your application is successful you will be required to provide certain documents. Further information on what documents will be required is provided in the application guidelines.

IMPORTANT INFORMATION

Only the information you provide in this application will be considered.

You must answer all questions in the application as incomplete applications will not be considered for selection.

This application is to apply for a scholarship only. This is not an application for admission to an educational institution.

Personal details

* indicates a required field

Applicant *

Title | First Name | Last Name

Date of birth *

Must be a date.

Applicant Middle Name

Applicant Previous family name

Gender *

If other:

To respond to the questions in this section please Select 1 for Yes, 0 for No and 00 for Prefer not to answer.

Do you identify as an Aboriginal and/or Torres Strait Islander? *
○ 1 ○ 0 ○ 00
(1-Yes, 0-No, 00-Prefer not to say)

Do you come from a culturally and/or linguistically diverse background? *
○ 1 ○ 0 ○ 00
(1-Yes, 0-No, 00-Prefer not to say)

Eligibility Check

* indicates a required field

Citizenship / Residency

Are you an Australian Citizen or Permanent Resident of Australia? *
○ Yes ○ No
Note: You will need to upload proof at the acceptance stage.

Profession

Are you an Aboriginal or Torres Strait Islander Health Worker or Practitioner? *
○ Yes ○ No

Other scholarships

Are you currently receiving an ACN administered Australian Government funded scholarship that will continue in Semester 2 2026 (1 July - 31 December)? *
○ Yes ○ No

Eligible Short Courses

Before applying, please check the following criteria:

Applicants must be studying one of the following short courses:

Provider

Short Course

Website

Australian College of Nursing

Two-day Face-to-Face CPD Course

www.acn.edu.au

Australian College of Nursing

Single Unit of Study in Wound Management

www.acn.edu.au

Wound Innovations

Wound Innovations, Wound Care in the Ageing Population Course

www.woundinnovations.com.au

William Light Education

Wound Management Resource Program

www.wle.edu.au

Note: Courses must commence between 1 July - 31 December 2026. If your course is not listed in the table above, please contact the Scholarships Team for further assessment to determine eligibility.

Are you studying / or enrolled to study in one of the above courses?

○ Yes ○ No

IMPORTANT INFORMATION

If you have passed the eligibility questions, the next page (Ineligibility page) will have (Not Applicable). Please just select the next arrow at the bottom of the page and continue.

Ineligible

* indicates a required field

Unfortunately your answer to the last question makes you ineligible for this scholarship. If you disagree or have any concerns please contact the Scholarships Team scholarships@acn.edu.au. *

Course Information

* indicates a required field

Course Name:

ACN - Two day Face-to-face Course = 5

ACN - Single unit of Study in Wound Care Management = 5

William Light Education - Wound Management Resource = 4

Wound Innovations - Wound Care in Aging Population = 3

Please select the corresponding number for your enrolled course. *

○ 5 ○ 4 ○ 3

How is the course presented *

○ Face to Face ○ Online

You must be enrolled at time of acceptance

Commenced/Proposed start date *

Must be a date and between 1/7/2026 and 31/12/2026.

Proposed end date *

Must be a date and no later than 30/6/2027.

Contact Details

* indicates a required field

Please note:

It is the responsibility of all applicants to ensure that their contact details are correct, and that it is possible ACN to contact them if required. If you change your postal address or preferred email address, please email the Scholarships Team at scholarships@acn.edu.au.

ACN uses email as its main form of communication therefore all applicants are required to supply an email address that is checked on a regular basis. If there is a need to speak with you, this will be during standard business hours (9am to 5pm, Monday to Friday, Sydney/ Canberra time).

The contact details provided on this application will be used for notification. Notification of the outcome of your application is expected within four weeks of your application. ACN will make all reasonable attempts to contact you.

Applicant Home Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Applicant Postal Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Applicant Primary Phone Number *

Must be an Australian phone number.
Preferred Contact No.

Applicant Other Phone Number

Must be an Australian phone number.

Applicant Primary Email *

Must be an email address.

Applicant Other Email

Must be an email address.

Current employment

* indicates a required field

In your role as an Aboriginal or Torres Strait Islander Health Worker or Practitioner - Who is your current employer? *

What is your work area? *

What is your role? *

What is the address of your current workplace? *
Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Workplace phone number *

Must be an Australian phone number.

Workplace Email

Must be an email address.

Marketing Information

* indicates a required field

How did you hear about this scholarship?

(Please select up to a maximum of three options) *

- ☐ ACN eNewsletter
- ☐ ACN National Nurses Breakfast
- ☐ ACN website
- ☐ CNnect
- ☐ E-Flyer
- ☐ Education provider
- ☐ Educational institution
- ☐ Email from ACN
- ☐ Employer
- ☐ Facebook
- ☐ Flyer
- ☐ Friend/relative
- ☐ Instagram
- ☐ LinkedIn
- ☐ neo
- ☐ NurseClick blog
- ☐ Nursing & Health Expo
- ☐ Professional network/organisation
- ☐ School
- ☐ The Hive
- ☐ Twitter
- ☐ University
- ☐ Website
- ☐ Workplace
- ☐ Workplace College

At least 1 choice and no more than 3 choices may be selected.

Selection Criteria

* indicates a required field

ACN recommends that you check that you save your responses at regular intervals to ensure that you don't loose any information. You can always come back and add/double check your responses before you submit. There is a maximum word check available below the text box as there is a maximum word count of 200 words. You may use point form.

Please keep your responses under the word and character limit. Scholarships will be awarded on the recommendation of a selected committee and will be based on how you respond the following criteria:

How will completing a Wound Care short course improve your ability to deliver best practice wound care as an Aboriginal and Torres Strait Islander Health Worker and Practitioner? *

Word count:
Must be no more than 2000 characters no more than 200 words.

How will your participation in a Wound Care Short Course positively impact wound management outcomes in your workplace? *

Word count:
Must be no more than 200 words.

Application process

* indicates a required field

So that we may improve our services and ease of the application process, please complete the following:

How did you find this application process? *
- ○ Very difficult
- ○ Difficult
- ○ Moderate
- ○ Easy
- ○ Very easy

How satisfied are you with the application process? *
- ○ Very unsatisfied
- ○ Unsatisfied
- ○ Ok
- ○ Satisfied
- ○ Very satisfied

Your feedback is important to us. We would welcome any comments you may have about the application process. We are happy to receive positive and negative comments.

Declaration

* indicates a required field

The Declaration is legally binding and indicates that you have, to the best of your knowledge, provided true and correct information. There are penalties for knowingly giving false or misleading information.

This declaration must be completed.

I, the applicant declare that:

The information provided in this application form is true, accurate,and complete to the best of my knowledge and belief. *
○ Yes ○ No

The responses to the selection questions have been completed by myself. *
○ Yes ○ No

I will advise ACN, in writing, within 14 days of any change in my circumstances. *
○ Yes ○ No

I understand that:

The information on this form is collected for the purpose ofassessing eligibility and selection for this scholarship. *
○ Yes ○ No

The information on this form may be used for the purposes of obtaining aggregated information about the scholarship program and that any information gathered for this purpose will not identify me in any way. Personal Information may be disclosed to the Commonwealth or a subsequent Administrator for the purposes of administering the scholarship. *
○ Yes ○ No

I will be required to accept the Terms and Conditions of the Wound Care Scholarship if my application is successful. *
○ Yes ○ No

○ I have read and understand ACN Privacy Collection Notice.(See below)

Read the ACN Privacy Collection Notice

Lodgement

Before you submit your application:

- Ensure you have entered your correct email address. A confirmation email will be sent to this address. Please check your junk or spam emails as it may be delivered there. If you do not receive an email confirmation within 24 hours contact the Scholarships Team on 1800 061 660 orscholarships@acn.edu.au.
- Review your application before you submit as no changes can be made once this button has been pressed.
- If you are using a Hotmail, Windows live or MSN email address, please add scholarships@acn.edu.au to your safe senders list. This is to ensure you receive your submitted application email.

Once you have submitted your application you will be able to print a copy for your records. You can then review your application by going to ‘preview’ on the top right hand corner.