# ASCILITE PhD Bursary Nomination Form

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| Nomination year: |  |
| Name of Applicant: |  |
| Institution where enrolled: |  |
| URL of uploaded video: |  |
| Signature: |  |
| Email address: |  |
| Date: |  |

Please attach/address the following:

|  |  |
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| Attached proof of enrolment in full-time PhD |  |
| Provide a title of your video |  |
| URL of video |  |
| Other (anything else you wish to state) |  |

Please return this form by email to secretariat@ascilite.org by the due date indicated on the ASCILITE website.