John Flynn Dental Assistant Scholarship

The John Flynn Dental Assistant Scholarship was established by Royal Flying Doctor Service Tasmania in 2006 for dental assistants who are studying with TasTAFE in Certificate III. The scholarship aims to further their workplace skills by providing an experience of living in remote Australia and working there with the RFDS.

The scholarship is dedicated to the memory of Reverend John Flynn who recognised the desperate need to provide skilled medical care to remote areas of Australia. In 1928, Flynn’s vision became a reality when he pioneered Australia’s first medical flying service. Today, over ninety years later the iconic Australian organisation is known as the Royal Flying Doctor Service and delivers 24-hour emergency aeromedical and primary health care services to those who live, work and travel throughout Australia. Its founder, John Flynn is honoured on our $20 note.

The Scholarship comprises:

* Two weeks flying and clinical work experience as an assistant to the RFDS Dentist operating from the Dubbo RFDS Base in NSW;
* Accommodation in Dubbo;
* Return flights to Dubbo;
* A living allowance of $100 per day; and
* Reimbursement of formal costs such as immunisations and police check.

No previous RFDS experience is required.

Tasmanian candidates may apply for the scholarship within 18 months of commencing Certificate III in Dental Assisting training. Or within their first year of full time training if a school based trainee.

Applications open on Monday the 12th of July and close on Monday the 2nd of August 2021.

The application form is available on the TasTAFE and RFDS websites from Monday the 12th of July, 2021.

Please ensure you read all the terms carefully.

If you have any questions please contact your TasTAFE Dental Teacher or Christine Austin-Lund on phone: 6477 7455 or by email: christine.austin-lun@TasTAFE.tas.edu.au



Eligibility of candidates

Applications are open to Tasmanian candidates who may apply within 18 months of commencing Certificate III in Dental Assisting training or in their first year of full time training if completing a school based traineeship.

Selection criteria

Scholarships will be awarded on the basis of:

* Interpersonal and communication skills that will enable the applicant to act as an ambassador for RFDS Tasmania
* Interest in rural oral health
* Dental assisting experience or other relevant experience
* Referee’s report
* Understanding of the work of the RFDS
* Qualifications

To apply

Applications should be submitted, **via post**, by Monday the 2nd of August to the following address:

Jocelyn McLean

Royal Flying Doctor Service Tasmania

PO Box 140, Evandale TAS 7212

\**Please note*: Emailed applications will not be considered.

Please include all of the following documents:

* A covering letter of no more than one page, illustrating your suitability for the position and your knowledge of the RFDS and Rev. John Flynn.
* An application form completed by the applicant. Please type your responses into the form provided, print and sign.
* Referee statement in support of your application. Please use the referee statement form attached. **References are privileged information and must be forwarded directly to the RFDS by the referee.**
* Work release form completed and signed by your employer.
* Evidence of completion of Certificate III in Dental Assisting if completed.

Please only supply the requested documentation.

Applications should be typed and must be on the

form.

It is suggested that you keep a copy of your application for future reference.

Incomplete, late or emailed applications shall not be considered**.**

Receipt of applications will be confirmed via email. Please contact if you do not receive this by the due date.

Shortlisted candidates will be interviewed in Launceston on the evening of the 18th of August.

Terms and conditions

The Scholarship comprises:

1. Two weeks flying and clinical work experience as
2. an assistant to the RFDS Dentist operating from the Dubbo RFDS Base in NSW.
3. Accommodation in Dubbo.
4. Return flights to Dubbo.
5. A living allowance of $100 per day and reimbursement of formal costs.

Under the Royal Flying Doctor Service Tasmania insurance policy, the recipient whilst engaged in the scholarship placement, is covered by the Insurer’s Group Personal Accident and Sickness Insurance.

The RFDS may terminate a scholarship if:

1. At any point, the candidate is found to have provided the RFDS with false or fraudulent information.
2. Whilst representing the RFDS the candidate does not conduct themselves in a way that is befitting an ambassador of the RFDS.
3. Upon such a termination, monies already paid to the candidate and not duly expended or committed, shall be returned to the RFDS Tasmania.

The scholarship holder is required to attend a scholarship presentation during the last week of November and give a 10-minute report on their experiences and participate in mutually agreed engagements as an ambassador of the RFDS in the year of tenure.

Applications are available at the RFDS website <https://www.flyingdoctor.org.au/tas/our-services/scholarships-tas/> or TasTAFE website or by contacting the TasTAFE Dental Team

Application form, to be completed by the applicant

|  |
| --- |
| **Title (Mr, Mrs, Miss, Ms)** |
|  |
|  |
| **Full name of applicant** |
|  |
|  |
| **Full date of birth** |
|  |
|  |
| **Address for correspondence** |
|  |
|  |
| **Email address** |
|  |
| Correspondence and advice regarding the outcome of your application will be sent to this address. Please ensure that your email address details are correct. |
|  |
| **Telephone number** |
| Home |  |
|  |  |
| Work |  |
|  |  |
| Mobile |  |
|  |
| **Certificate III commencement date** |
|  |
| **Motivation for applying (150 words)** |
|  |
| **Interest in RFDS and rural oral health (150 words)** |
|  |
|  |
| **Relevant work or other experience (150 words)** |
|  |
|  |
| I hereby declare that all information I have provided in this application is true and complete. If successful, I agree to abide by all Terms and Conditions of the scholarship.**Signed (applicant)** |
|  |
|  |
| **Date** |  |

Statement in support of application, to be completed by referee (preferably in Dentistry)

**This reference is privileged information and must be forwarded directly to the RFDS by the referee**. Its purpose is to guide the selection panel in their deliberations relating to the personal and professional standing of the applicant. It will not be shared with the applicant.

|  |
| --- |
| **Your full name** |
|  |
|  |
| **Dental Surgery (if you work in dentistry)** |
|  |
|  |
| **Position held** |
|  |
|  |
| **Email**  |
|  |
|  |
| **Telephone number** |
|  |
|  |
| **Name of applicant** |
|  |
|  |
| **Relationship to applicant** |
|  |
|  |
| **Length of time known to applicant** |
|  |
| **Comment** |
| **Applicant’s experience as a Dental Assistant** |
|  |
| **Applicant’s ability to represent RFDS as an ambassador** |
|  |
|  |
| **Applicant’s interest in rural oral health and other comments** |
|  |
|  |
| **Signed (referee)** |
|  |
|  |
| **Date** |  |

Work Release Form: to be completed by scholarship applicant’s employer

Your Dental Assistant staff member wishes to apply for the John Flynn Dental Assistant Scholarship offered by RFDS Tasmania. Should this applicant be successful, she/he will be required to spend two weeks working as an assistant to RFDS Dentist based at Dubbo, NSW.

Please indicate your support in releasing your staff member for two weeks from Monday the 11th of October to Friday the 22nd of October should she/he be the successful applicant.

Due to the uncertain nature of COVID we may be required to postpone the placement. Please also indicate if you are willing to renegotiate dates in the event current dates are unsuitable.

For further information on the John Flynn Dental Assistant Scholarship, please contact Jocelyn McLean at the Royal Flying Doctor Service Tasmania at Jocelyn.McLean@rfdstas.org.au or 03 6391 0509.

|  |
| --- |
| **Your full name** |
|  |
|  |
| **Dental Surgery**  |
|  |
|  |
| **Address** |
|  |
| **Email**  |
|  |
|  |
| **Telephone number** |
|  |
| **Name of applicant** |
|  |
|  |
| I, the employer, support this application and agree to the release of the applicant from his or her work to enable them to undertake this placement if successful. I also agree to renegotiate dates in the event that the placement is delayed due to COVID.**Signed** |
|  |