

QUEENSLAND-SMITHSONIAN FELLOWSHIPS PROGRAM

FINANCIAL INCENTIVE AGREEMENT DECLARATION

With reference to this Application for a Queensland-Smithsonian Fellowship, I, the nominated Fellow:

- 1. authorise the Queensland Government to undertake any checks necessary to assess the Application, subject to any written notification as to confidentiality provided to the Queensland Government;
- 2. declare that:
 - (a) the information supplied in this Queensland-Smithsonian Fellowships Application is true, accurate and not misleading in any respect;
 - (b) I have received no guarantees or assurances that this Queensland-Smithsonian Fellowships Application will be approved by the Queensland Government; and
- 3. acknowledge and agree that, if this Queensland-Smithsonian Fellowships Application is successful, I will comply with the Queensland-Smithsonian Fellowships Financial Incentive Agreement Terms and Conditions (version 2024), a copy of which was available on the Queensland Government's website when the Application was completed.

SIGNED by the nominated Fellow:

Name of nominated Fellow

Signature of nominated Fellow

Date

We, the applicant organisation: acknowledge that if this Queensland-Smithsonian Fellowships Application is successful we will be bound by the

Queensland-Smithsonian Fellowships Financial Incentive Agreement Terms and Conditions (version 2024), a copy of which was available on the Queensland Government's website when the Application was completed; and

- 1. agree that when the Financial Incentive Agreement execution page is signed by the authorised officer from the Queensland Government, a legally binding agreement will exist between the applicant organisation and the State of Queensland consisting of the following:
 - (a) the Queensland-Smithsonian Fellowships Financial Incentive Agreement Terms and Conditions (version 2024);
 - (b) the Queensland-Smithsonian Fellowships Application and any supporting information; and
 - (c) the Queensland-Smithsonian Fellowships Guidelines 2024.

SIGNED for and on behalf of the applicant organisation by:

Name of authorised officer	Position of authorised officer	
Signature of authorised officer	Date	
In the presence of:	witness	siqnature of witness