Approval of Overseas Professional Experience Placement



PERSONAL DETAILS					
Student ID			Discipline		
Surname			Given Names		
Home Address					
Town		State		Post Code	
PROPOSED PLACEMENT INFORMATION AND SITE DETAILS					
Placement start date			Placement end da		
Name of Facility					
Postal Address of Facility					
State	Post Code		Country		
Contact person (if known)					
Position		Department			
Phone		Email			
HEAD OF DISCIPLINE TO COMPLETE - Please select one of the following:					
Course requirement OR Of benefit to student in his/her course of study					
APPROVAL FROM HEAD OF DISCIPLINE					
Full Name	Sig	nature		Date	
APPROVAL FROM DEAN OF COLLEGE					
Full Name	Sig	nature		Date	

IMPORTANT DEFINITIONS:

<u>Course requirement</u> – This is work experience or placement which is a requirement of the Students course of study. Without successful completion of this work experience/placement the student cannot complete the requirements of their degree.

<u>Of benefit to student in his/her course of study</u> – This is work experience/placement which although considered beneficial/helpful in

providing a more well-rounded experience to the student of their chosen field of study, is not required in order for the student to successfully complete the requirement of their degree.