

APR.INTERN – STUDENT APPROVAL FORM

APR.Intern requires all candidates to submit the below approval form with their Student Application.

Visit www.aprintern.org.au or contact APR.Intern contact@aprintern.org.au for assistance.

All mandatory fields must be complete to ensure your application is processed.

A. STUDENT DETAILS

MANDATORY

Name:**Student ID:****University:****Faculty:****Enrolment status:****Expected thesis submission date:****Visa Type:****Field of Research (FOR) Code:**

B. INTERNSHIP INFORMATION

IF APPLICABLE

Organisation & APR Number:**Project Title:****Duration:****Business Development Contact:****Business Development Contact Phone Number:**

C. PRINCIPAL SUPERVISOR DECLARATION

MANDATORY

To be completed by the student's Principal Supervisor, indicating support for the student identified in Section A.

I have discussed with my student the possibility of a research internship with APR.Intern and I support their submission of a Student Application to participate in this program.

I agree to be the Academic Mentor throughout the internship and will provide the necessary support to the student and guidance on the research project. (Proceed to section E)

I will not be acting as the Academic Mentor for this internship and acknowledge that the responsibilities and academic mentorship fee will fall with the person assigned to the role.
(Section D must be completed with details of agreed Academic Mentor)

Name:**University:****Email:****Phone Number:****Department:**

SIGNATURE

FULL NAME

Please note most browser PDF viewers do not support the digital signature fields in the form. You will need to download and open the form in a PDF editor to digitally sign.

D. ACADEMIC MENTOR DECLARATION**IF APPLICABLE**

To be completed by the nominated Academic Mentor, when the Principal Supervisor will not be the Academic Mentor for the project.

I agree to be the Academic Mentor throughout the internship and will provide the necessary support to the student and guidance on the research project. (Proceed to section E)

Name:**University:****Email:****Phone Number:****Department:**

SIGNATURE

FULL NAME

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E. AUTHORISED APPROVER FOR PHD STUDENT**MANDATORY**

To be completed by the authorised approver for the University.

For a list of approvers please visit the APR.Intern website. <https://aprintern.org.au/student-approval-form/>

I support the submission of this student's application to participate in the APR.Intern program for the nominated project in Section B, OR until the expiry date listed below.

I confirm that the student holds an 'active' enrolment in their PhD degree or a university designed PhD internship unit/subject to meet the requirements of APR.Intern.

I confirm that the student details in Section A are correct.

I confirm that the university agrees to pay the facilitation fee of \$3k where applicable.*

*The \$3k fee applies to non-mathematical science internships where a university has already used any free internships allocated based on AMSI membership. APR subscribed universities do not pay this fee.
More info: <https://aprintern.org.au/about-apr-intern/subscription/>

This approval form expires:**Notes/Comments:**

SIGNATURE

FULL NAME

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