 **Visiting Student Admission Form**

Use this form to apply to undertake research as a Visiting Student at QIMR Berghofer.

***Please fill this form out electronically, then send it to your QIMR Berghofer supervisor as a word document to fill in section 2. When you get it back from them, combine it with all supporting documents into ONE PDF and email to*** ***Graduateeducation@qimrberghofer.edu.au***

**Processing times for Institute admission:**

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| --- | --- |
| Student is enrolled in a Queensland University | 2 weeks |
| Student is enrolled in an Overseas University | 6 weeks |

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| **Section 1: To be completed by student** |
| **Student Details** |
| Surname: |  | Given Names: |  |
|  |  |  |  |
| Email Address: |  | Contact Number: |  |
|  |
| Are you an International student (if yes, please provide University agreements, your medical insurance, visa)? |  |
|  |
| University: |  | University School: |  |
|  |  |  |  |
|  |  |  |  |
| **Enrolment Details** |
| Project Title: |
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|  |
| Reason for spending time at QIMR Berghofer: |       |
|  |  |
| Proposed Start Date at Institute: |  | Proposed End Date at Institute: this must align with your documentation |  |
|  |  |
| QIMR Berghofer Supervisor: |       | Attendance: (at Institute) |  |
|  |  |
| Do you require a nomination letter for an Australian visa? |       |
|  |
| **Supporting Documents - Please indicate that you have attached all required documents** |
| Student IP Deed (compulsory) | **[ ]**  |
| Academic Curriculum Vitae (compulsory) | **[ ]**  |
| Project outline (compulsory) | **[ ]** (no more than 1 page in length) |
| Copy of passport or drivers licence (compulsory for all students) & visa (compulsory for international student only) | **[ ]**  |
| Proof of university enrolment, training agreement or letter of support (compulsory) | **[ ]** (this must be provided before Institute induction) |
| Proof of insurance for period of QIMR Berghofer placement (compulsory for international students only) or if you are a MD self-guided research student please provide evidence that you registered your research. | **[ ]**  |
| **Additional Information:** |
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| **Section 2: To be completed by Institute Supervisor (COMPULSORY)** |
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| Do you have ethics approval for this project? |  |
|  |  |
| Does this project need a MTA or DTA? |  |
|  |  |
| Are you offering financial support for this student? (if yes please provide cost centre number below) |  |
|  |  |
| If you selected yes to the above question, what is the Cost centre number? |  |
|  |  |
| Do you have the grants officer approval to use this cost centre for this purpose? (if yes, please provide the email correspondence separately) |  |

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| Do you have a personal relationship with the prospective student or a co-supervisor that could create an actual, potential or perceived conflict of interest in your role as a supervisor (refer to the [Conflict of Interest Policy](https://intranet.qimrberghofer.edu.au/media/2wqjrmm2/conflict-of-interest_policy_council-approved_20240213.pdf) and [Procedure](https://intranet.qimrberghofer.edu.au/media/wvxj4y3r/conflict-of-interest-procedure_2024-02-20_dir_ceo_approved.pdf) for more information)? |  |

*(****If yes to the above****, you must formally register this conflict through the Institute’s COI system.  An approved conflict management plan must be in place before the student’s admission will proceed).*

Please note: Students with appointments less than 12 months will not be given a QIMR Berghofer email address. Institute correspondence will be transferred to a nominated email account during their appointment.