



## Student Activity Approval Form

To make sure that you are covered by the university's insurance policy when undertaking a practical/community placement or work experience or field assignments or research project, please fill out this form with approval from your supervisor. Upon completion please forward form to [Insurance.office@anu.edu.au](mailto:Insurance.office@anu.edu.au).

### Student contact details

First name:	<input type="text"/>	Last name:	<input type="text"/>
University ID:	<input type="text"/>	Phone number:	<input type="text"/>
Course:	<input type="text"/>		
Start date:	<input type="text"/>	End date:	<input type="text"/>

### Work experience details

Organisation providing supervisor:	<input type="text"/>
Location of work experience/project:	<input type="text"/>
Work experience/supervisor:	<input type="text"/>
Contact details for work experience/supervisor:	<input type="text"/>

### Head of Department / Course Convener/ Program Convener approval

*I certify that this person is enrolled with the ANU and is undertaking a practical/community placement, work experience or field assignments or research project approved by the ANU.*

Print name:	<input type="text"/>	University ID:	<input type="text"/>
Signature:	<input type="text"/>	Date:	<input type="text"/>