

Please complete your details below to apply for the Senior Research Immersion Program and email by the relevant due date to sparged@tri.edu.au for consideration.

Student Name:			
Date of Birth: <i>(dd/mm/year)</i>			
Year Level:		LUI number:	
Student School email:			
Student identifies as: <i>(ie. First Nations, EALD, Disability)</i>		Gender:	
SCHOOL DETAILS	<i>Meet with your Teacher/HOD to discuss your application</i>		
School Name:			
Teacher/HOD Name:			
Teacher/HOD Email:		School Phone:	
PARENT/GUARDIAN DETAILS			
Parent/Guardian Name:			
Home Address:			
Parent/Guardian Email:			
Parent/Guardian 1 Mobile:		Parent/Guardian 2 Mobile:	
PROGRAM DATES	<i>Select your session preference in order (1 – 2) for Group 1 in the table below. Note closing dates apply for each Group, see page 4:</i>		
Group 1 APRIL	Session 1: 8 April - 12 April 2024		
	Session 2: 15 April - 19 April 2024		
Group 2 JULY	Session 3: 24 June - 28 June 2024		
	Session 4: 1 July - 5 July 2024		
Group 3 SEPTEMBER	Session 5: 23 September - 27 September 2024		
	Session 6: 30 September - 4 October 2024		

STUDENT INTEREST STATEMENT

Please write an introduction statement (max 200 words) on the **qualities** you would bring to the SPARQ-ed Research Immersion Program, citing examples where possible.

Explain (max 200 words) why you want to take part in the program, detailing any area of special scientific interest or **career aspirations** you may have.

STUDENT ACTIVITY LOG	
Identify 3 activities that demonstrate the qualities described in your 'Student Interest Statement'. At least one (1) activity should be STEM related.	
Name of Activity # 1:	
When undertaken:	
Give a brief description of your role in the activity:	
Name of Activity # 2:	
When undertaken:	
Give a brief description of your role in the activity:	
Name of Activity # 3:	
When undertaken:	
Give a brief description of your role in the activity:	
SCHOOL RECOMMENDATION <i>*(To be completed by your current Science Teacher or Head of Department)</i>	
Write a short statement outlining the students' strengths and suitability for the SPARQ-ed Senior Research Immersion Program.	

SCHOOL TEACHER/HEAD OF DEPARTMENT ACKNOWLEDGEMENT			
<input type="checkbox"/> This statement accurately reflects the students' eligibility to participate in the SPARQ-ed program.			
Teacher Name:		Signature:	
Position:		Date:	
PARENT/GUARDIAN ACKNOWLEDGEMENT			
<i>Program fees are the responsibility of the student unless a prior arrangement has been made with the respective School. This must be communicated to SPARQ-ed upon acceptance to the program.</i>			
<input type="checkbox"/> I acknowledge that payment is required within (7) business days from the invoice date. A cancellation fee may apply. Registration for this program is on TRI's standard terms and conditions, which are available here: SPARQ-ed Attendee Terms and Conditions final.pdf .			
<input type="checkbox"/> I hereby give permission for _____ to participate in the SPARQ-ed Research Immersion Program.			
Parent/Guardian Signature:		Date:	
Student Signature:		Date:	

CHECKLIST:		<i>Each application is carefully considered based on the information you have provided. Please ensure to check all criteria are addressed and attachments are included before sending through your submission. We will be in contact to confirm the outcome of your application 1-2 weeks after the relevant closing date.</i>	
<input type="checkbox"/>	Completed Interest statement	<input type="checkbox"/>	Acknowledgements signed
<input type="checkbox"/>	Complete Activity Log	<input type="checkbox"/>	Attach latest report card
<input type="checkbox"/>	School Recommendation	<input type="checkbox"/>	Session preference

APPLICATIONS FOR:		CLOSING DATE:
GROUP 1 - APRIL	SESSION 1 & SESSION 2	12 February 2024
GROUP 2 - JULY	SESSION 3 & SESSION 4	06 May 2024
GROUP 3 - SEPTEMBER	SESSION 5 & SESSION 6	29 July 2024

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