**SPARQ-ed PROGRAM REGISTRATION FORM 2022**

Please enter details below to register for a program experience and email to [sparqed@uq.edu.au](mailto:sparqed@uq.edu.au).

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **School:** |  | | | | | | | | | | | |
| **School ICSEA index:** | <950 |  | Value | |  | >950 | |  | | Value | |  |
| **Address:** |  | | | | | | | | | | | |
| **School Contact:** |  | | | | | | | | | | | |
| **E-mail:** |  | | | | | | | | | | | |
| **Telephone:** |  | | | | | | **Mobile:** | |  | | | |
| **Number of students:** | **Excursion**  *(max. 28)* | | |  | | | **Incursion**  *(max. 28)* | | | |  | |
| **Year Level:** |  | | | | | |  | | | | | |

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| --- | --- | --- | --- | --- | --- | --- |
| **WORKSHOP EXPERIENCE** | *Select from Excursion or Incursion workshop experience in the table below:* | | | | | |
| **Excursion:** |  | **Topic:** |  | | | |
| **Preferred dates:** | **1.** |  | | **Time:** | |  |
|  | **2.** |  | | **Time:** | |  |
| **Request/Comments:** |  | | | | | |
| **Incursion:** |  | **Topic:** |  | | | |
| **Preferred dates:** | **1.** |  | | | **Time:** |  |
|  | **2.** |  | | | **Time:** |  |
| **Request/Comments:** |  | | | | | |
| *\*Please note that this is not a booking confirmation, as preferred dates and times are subject to availability. We will contact you to confirm your booking, provide payment advice and relevant program resources.* | | | | | | |

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| --- | --- | --- | --- | --- | --- |
|  | **I acknowledge that payment is required five (5) days prior to the workshop.** | **Signature** |  | **Date** |  |

SPARQ-ed (Students Performing Advanced Research QLD)

The University of Queensland | Translational Research Institute (TRI)

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