**PROFESSIONAL DEVELOPMENT WORKSHOP REGISTRATION FORM 2023**

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

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| --- | --- | --- | --- |
| **Name:** |  | | |
| **Position:** |  | | |
| **School:** |  | | |
| **Address:** |  | | |
| **School Sector:**  *(EQ, ISQ, QCEC)* |  | | |
| **E-mail:** |  | **Mobile:** |  |
| **Workshop topic:** |  | | |
| **Date:** |  | **Time:** |  |
| **Request/Comments:** |  | | |
| *\*Please note that this is not a booking confirmation. We will contact you to confirm your booking, provide payment advice and relevant program resources.* | | | |

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| **ACKNOWLEDGEMENT** | | | | |
|  | I acknowledge that payment is required five (5) days prior to the workshop. | | | |
|  | I understand that enclosed shoes and PPE must be worn in the SPARQ-ed PC2 Laboratory area. | | | |
| **Signature:** | |  | **Date:** |  |

SPARQ-ed | Students Performing Advanced Research QLD-Education

The University of Queensland (UQ) | Translational Research Institute (TRI)

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