2019 School of Languages and Linguistics

Postgraduate (Research) Workspace Application

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| **Your details** | | | |
| Your name: |  | Student number: |  |
| Email: |  | Contact number: |  |

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| --- | --- |
| **Course Details** | |
| Course: | Full Time / Part Time |
| Commencement Date: | Expected Completion Date: |
| Are you tutoring this semester? Y / N | Do you plan to tutor next Semester? Y / N |

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| **Workspace Requirements:** | | | | | | |
| Do you currently occupy a space? If so, please indicate date you started using this space | | | Y/N | | Desk/Room: | |
| If no, what date you would like to start using a workspace | | | 2019 start date: | | | |
| How long do you require the space for? | | | 1 year | Or | | Other specified time: / / |
| Type of space you require: | | | Desk Only | | Desk and Computer | |
|  |  |  |
| Would you be agreeable to sharing your desk with another candidate? | | | Yes | | | No |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| *Please tick the squares below to indicate the times you wish to use the workspace. In case you are required to time-share, please place a number from ‘1’ through to ‘5’ to indicate your five most preferred times.* | | | | | | | |
|  | Mon | Tues | Wed | Thurs | Fri | Sat | Sun |
| AM  (until 1pm) |  |  |  |  |  |  |  |
| PM  (until 6pm) |  |  |  |  |  |  |  |

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| **Comments: please provide any additional information in support of your application:** |
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| ***I have read the SOLL graduate (research) workspace guidelines and agree to the terms and conditions:*** | **Signature:**  (insert your electronic signature or just type your name)  **Date:** |