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

|  |  |
| --- | --- |
| **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 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Workspace Requirements:** | | | | |
| Do you currently occupy a space? If so, please indicate date you started using this space | Yes  Date commenced in space: / / | | No | |
| If no, what date you would like to start using a workspace | / / | | | |
| How long do you require the space for? | 6 months | 1 year | | Other specified time: / / |
| Type of space you require: | Desk Only | | Desk and Computer | |
| Would you be willing to use a desk only space if no computer was available? | Yes | | No | |
| Would you be agreeable to sharing your desk with another candidate? | Yes | | No | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Times Workspace will be used: 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 |
| Morning  (until 1pm) |  |  |  |  |  |  |  |
| Afternoon (until 6pm) |  |  |  |  |  |  |  |
| Evening  (after 6pm) |  |  |  |  |  |  |  |

|  |
| --- |
| **Comments: please provide any additional information in support of your application:** |
|  |

|  |  |
| --- | --- |
| ***I have read the*** [***SOLL graduate (research) workspace guidelines***](http://arts.unimelb.edu.au/__data/assets/pdf_file/0007/2634280/soll-graduate-research-workspace-guidelines-2018-1.pdf) ***and agree to the terms and conditions*** | **Signature:** (insert your electronic signature or just type your name)  **Date:** |