Undergraduate Research Project IMB Expression of Interest (EOI) Form



ONLY forward to an IMB Group Leader at their request, and ONLY with a valid ID #.												
	ID:	#										
Applican	t											
Name						UQ St	udent#					
Address						E-mail						
UQ Unde	rgradua	te C	Course									
Course Name						Cours	e Code					
Coordinator Name						E-mail						
Academi	c Refere	es										
Name		е				F	osition					
Institution		n				E-mail						
Name		е				Position						
Institution		n					E-mail					
Proposed	d Dates											
Start Date		е				С	Ouration					
Academi	c Qualif	icat	ions									
Degree		е	Institutio			Country			Start		Finish	
English Language Proficiency (ONLY check scheme and list scores if they are current)												
IELTS			TOEFL Paper						Other			
Read			Speak	W	rite			Listen		Total		
Research Interests (provide a brief description)												
Attached Supporting Documents (including academic achievements)												
CV Academic Transcripts												
		Prizes/Award	:/Awards			English Language						
Declaration Declaration												
I acknowledge that submission of this EOI form is solely for the purpose of evaluating my request, and												
does not guarantee acceptance. I also acknowledge that all the information provided in the form (and attached document) is true and correct.												
attached document) is true and correct.												
Signature	gnature: Date:											