Asian Neighbours Network - Training Through Research

The University of the Sea
2008 Research Cruise Application Form

Section 1: Personal Details (Please Use Capital Letters)

Name, Address & Contact Details:

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<tr>
<th>Title</th>
<th>Surname</th>
<th>Given Names</th>
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Address


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<th>Postal or ZIP Code</th>
<th>State or Province</th>
<th>Country</th>
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Date of Birth  Gender  Email Address

- Male
- Female

Home Phone Number  Mobile/Cell Phone  Fax Number

Please note:
Your fax number or email address may be used to send you important documents, such as your letter of invitation aboard the ship. Please make sure that you provide either a fax number, or an email address which will accept attachments.

Citizenship and Passport Details:

<table>
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<tr>
<th>Citizenship</th>
<th>Passport Number</th>
<th>Expiry Date</th>
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Please note: Applicants are required to hold a valid passport, with at least 12 months before expiry from the commencement of the cruise.

*It will be the applicant’s responsibility to obtain any necessary visas.

International Student Identity Card:

Do you have a current International Student Identity Card that will be valid for the duration of the cruise? (Please check the appropriate box).

- YES
- NO

Institution: ________________________________
**Section 2: Academic and Educational Details (Please Use Capital Letters)**

Provide details of all Tertiary study (please list from most recent to least recent, including your current studies)

<table>
<thead>
<tr>
<th>Name of Qualification</th>
<th>Degree program</th>
<th>Institution</th>
<th>Year Study Commenced</th>
<th>Completed?</th>
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If currently undertaking a research degree, please give title of thesis:

____________________________________________________________________________________________

____________________________________________________________________________________________

If extra space is required, please supply additional details on a separate sheet. Please provide a certified copy of your academic record*.

**Section 3: Personal Statement**

Please attach a one page Personal Statement to this application form. This Statement must be written by you and should reflect your personal views. The statement should include:

- An indication of your reasons for applying for the University of the Sea Research Cruise,
- An outline of the expectations you have of your participation,
- A reflection on your educational experience to this point and how it has prepared you for participation in the cruise,
- Your future career plans,
- Any other information you feel will help us assess your application.

**Section 4: Recommendation of Academic Supervisor**

I support this application and have attached a letter recommending this student.

Signature: ____________________________ Date: ____________

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<th>Name</th>
<th>Position</th>
<th>Capacity in which you have known the applicant</th>
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<tr>
<td>Contact telephone number</td>
<td>Fax number</td>
<td>Email Address</td>
</tr>
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Section 5: Declaration

I hereby give permission for the University of Sydney to obtain any information required to substantiate this application. I declare that the information supplied in this application is true, accurate and complete.

Signature: ___________________________ Date: ____________

Please note:

- Short-listed applicants will be required to undergo a medical examination before final selection of participants.
- Applicants must provide details of their own insurance.
- Applicants must have the ability to communicate in and understand written and verbal English.
- Participants will be expected to collaborate with their research partners over the year following the cruise, in order to produce one or more research papers.
- Participants must provide a comprehensive report on completion of the cruise.

Checklist of Attachments:

YOU MUST ATTACH THE FOLLOWING TO THIS APPLICATION:

☐ A passport sized, clear photograph of your head and shoulders.
☐ If you are a full-time student, a photocopy of your student card, clearly showing your name and the expiry date.
☐ A certified copy of your academic transcript/record (This can be certified by your supervisor or by the Student Centre/Faculty Office/Administration of your University/Institution)
☐ Personal Statement (see Section 3)
☐ Supervisor's Letter of Recommendation (see Section 4)
☐ Completed Personal Information Form (attached), along with a photocopy of the details page of your passport, clearly showing your name, your place of birth and the passport expiry date. This form is for the research vessel administrators.

Closing dates – submit by 5pm:

Cruise 1 – 1 August 2008
Cruise 2 – 1 October 2008
Cruise 3 – 1 October 2008

Questions?
Contact Dr Michelle Blewitt:
Ph: +61 (2) 9036 9246
Fax: +61 (2) 9351 0184
Email: uniofthesea.admin@usyd.edu.au

For more information & application submission:

Dr Michelle Blewitt
The University of the Sea
School of Geosciences, F09
University of Sydney, NSW 2006.
AUSTRALIA

Or hand deliver to:
Room 308, Madsen Building, F09
I. **CIVIL STATUS**

First Name: ______________________________ Surname: ______________________________

Date of Birth: ___________________________ Nationality: ___________________________

Birth Place & Country: ____________________________________________________________

Full address: ___________________________________________________________________

Home phone: _____________________________ Mobile: ________________________________

Blood Group: ___________________________ D.o.B. _________________________________

Passport Number: ________________________ Date of Expiry: _________________________

Date of Issue: _____________________________ Issued By: _____________________________

*Please attach 1 copy of the first page of your passport, containing all the passport details.*

In case of emergency: (*please provide 2 people*)

First Name: ______________________________ Surname: ______________________________

Full address: ___________________________________________________________________

Home phone: _____________________________ Mobile: ________________________________

II. **PROFESSIONAL POSITION (OR STUDENT DETAILS):**

Employer’s/University name and address: ____________________________________________

__________________________________________________________

Phone number: _______________________ Fax number _____________________________

Email: _________________________________________________________________

Duties: ______________________________________________________________________

Signature: ___________________________ Date: ________________________________