

Form 2 Student application

Course-related learning placement proposal

The student must complete this form after receiving the completed, **host details (form 1)**. The maximum number of hours that will be approved is 80 hours.

Student details

Name:	Student ID number:
Telephone number:	Monash student email:
Course:	Faculty:
Year level:	Placement start date:
Host organisation:	Placement end date: If your placement is longer than two weeks, please attach a list of specific dates and times.
Skills development	
Course theory application State how you will apply the theories you have studied in your course, during your learning placement:	
Skills for work Which of the following skills, attributes and knowledge will you apply or develop during this experience?	
□ Communication □ Teamwork □ Creativity and innovation □ Initiative and □ Planning and organisation □ Professional □ Other (please specify)	☐ Problem identification and solution denterprise ☐ Use of tools and technology
How do you expect to apply or develop these skills during your learning placement? Provide examples.	

Submitting this form

Email this form with a completed and signed host details (form 1) to your faculty academic staff member.

Faculty approval

Course-related learning placement proposal

The course-related learning placement **must be approved by an academic staff member** in the student's faculty who can assess and confirm the links between the student's course and the learning in the placement. This is to be documented by the host in form 1 and the student in form 2. The University extends personal accident insurance, applicable to student's course activities, to these placements for a **maximum of 80 hours**. In addition to confirming the relevance of skill development in the placement, approvers may also consider other factors such as:

- student academic progress
- year-level (the student must be a postgraduate or at least in their second year of a degree)
- availability of course-embedded work-integrated learning opportunities.

Please note the information about the Fair Work Act (2009) on the **insurance requirements** page in the **host details (form 1)**.

Approval

Approver's name:		
Job title:	Faculty:	
Approved: Yes \(\square\) No \(\square\)		
If no, reason(s) for rejection:		
Signed:	Date:	

Submitting this form

Allow a minimum of ten working-days for insurance coverage to be sent.

Following faculty approval, submit the host details (form 1) and student application (form 2)

Engineering students

- Email: Include your department/specialisation when emailing your forms to Engineering Continuous Professional Development Program, at eng.cpd@monash.edu
- Hard copies: Bring your forms to Student Services, 14 Alliance Lane, Clayton campus