**Internship application form**

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| **First name:** |  |
| **Middle name:** |  |
| **Last name:** |  |
| **Tertiary institution:** |  |
| **Academic course name:** |  |
| **Subject requiring course credits or internships:** |  |
| **Total hours required for internship:** |  |
| **Details about the subject:** |  |
| **Best university contact: e.g. career advisor or lecturer:** |  |
| **Preferred start date:** | Click or tap to enter a date. |
| **Preferred end date:** | Click or tap to enter a date. |
| **Available days:** |  |
| **Preferred branch  (please select):** | Choose an item. |
| **In a few words, why do you want to do an internship with the Commission?** |  |

The Commission recognises the importance of promoting or realising substantive equality for groups of people who have one or more protected attributes in the Equal Opportunity Act 2010, such as race, sex, disability, gender identity or sexual orientation. Accordingly, the Commission strongly encourages students from diverse cultural and linguistic backgrounds and/or with a disability to apply. Please complete the following below as part of your application:

1. Do you identify as an Aboriginal or Torres Strait Islander?

Yes No  Prefer not to say

1. Do you have a disability or require adjustments to allow you to work safely and productively?

Yes  No  Prefer not to say

If Yes, feel free to elaborate (optional):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Are you from a culturally and linguistically diverse background?

Yes  No  Prefer not to say

If Yes, please let us know more:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***As part of this application, please ensure you’ve also included the below:***

Evidence of your institution’s liability coverage: personal, indemnity and public liability insurance.

University agreement form

CV

Cover letter