



**CONFIDENTIAL
PAID INTERNSHIP**

**PLEASE COMPLETE THIS FORM AND E-MAIL IT TO US AT** **dcal@ucl.ac.uk**

**PERSONAL DETAILS**

|  |  |  |
| --- | --- | --- |
| Surname: | First Name: | Title: |
| Preferred Forename: | Date of birth: |  |
| Nationality: | Country of ordinary residence: |
| Address:  | Email address: |
|  |  |
| Postcode: |  |
| Correspondence address (if different) | Dates when address is valid FROM/TO: |
|  |  |

**EDUCATIONAL QUALIFICATIONS**

Detail your education since age 17. Starting with the most recent, please give details of your education, and qualifications.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| College/University (state country if outside the UK) | Start date (Mo/Yr) | End date (Mo/Yr) | Qualification (e.g. BA, MA) | Overall class/grade | Degree title: subjects studied and qualifications obtained |
|  |  |  |  |  |  |

**EDUCATION – QUALIFICATIONS CURRENTLY BEING TAKEN**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| College/University (state country if outside the UK) | Start date (Mo/Yr) | End date (Mo/Yr) | Qualification (e.g. BA, MA) | Degree title: subjects studied |
|  |  |  |  |  |

**LANGUAGES**

Is English your first spoken/written language? Yes 🞏 No 🞏

If “NO” detail any work experience or education that you have undertaken in English.

Provide the date and grade(s) of any English language test taken.

|  |
| --- |
|  |

Do you know a sign language? Yes 🞏 No 🞏 If yes, which sign language(s)?

|  |  |
| --- | --- |
| Name of Sign language | Skills (e.g. basic, conversational, fluent, etc.) |
|  |  |

**EMPLOYMENT HISTORY**

List your employment to date starting with the most recent.

|  |  |  |  |
| --- | --- | --- | --- |
| Name and Address of Employer (state country if outside the UK) | Start date (Mo/Yr) | End date (Mo/Yr) | Position held and main duties |
|  |  |  |  |

**STATEMENT IN SUPPORT OF YOUR APPLICATION**

Describe your academic interests and reasons for wishing to volunteer at DCAL. Detail your career objectives and any relevant non-academic achievements as well as any publications. Outline any other relevant experience including attendance at specialist workshops or short courses.

|  |
| --- |
|  |

**CONFIDENTIAL PERSONAL INFORMATION**

|  |
| --- |
| Are you: Hearing 🞏 Deaf 🞏 Other (please specify)  |
| Preferred Communication: Spoken English / BSL / Lipreading / other (please state):  |
| Please add any other personal information you consider relevant to your application. |

**AVAILABILITY/PROJECT INTEREST**

|  |  |
| --- | --- |
| Preferred start & end dates: | Full time or part time? |
| If part-time, please make note of your availability during the above time frame above: |
| If there is a particular theme/project you are interested in working on (or staff member you are interested in working with), please specify here: |

**To the best of my knowledge the answers given to the questions contained in this application and all statements made are true and accurate. Any falsification may be considered sufficient cause for rejection.**

Signature of Applicant.....................................................................Date...................................................