Application Form for AHST310/AHPG811

Personal details

First Name:	**Last Name:**	**Student No:**
Date of Birth:		
Address:	**Contact Numbers:** **(H):** **(W):** **(M):** **Email:**	

List of units taken in Ancient History or Egyptology

Unit	**Grade**

Have you travelled overseas? If yes, indicate country/ies and length of stay
Do you have any allergies, dietary requirements, medical conditions or disability or any special requirements?
Do you prefer to take part in any particular project? If yes, please indicate which one
How long would you be able to stay with the project?
Any additional technical or other skills? If yes, please indicate here in summary