Application for Placement Support | Grand Union DTP

*Please submit to* *placements.gudtp@socsci.ox.ac.uk* *no less than* ***3 months in advance*** *of the start of the proposed placement.*

# STUDENT DECLARATION

**Please tick all that apply:**

**I am hereby applying to the Grand Union Doctoral Partnership for Placement Support.**

**Before submitting this application,**

[ ]  I have been offered the placement detailed in the attached project plan.

[ ]  I have discussed this application with the GUDTP Placements and Professional Skills Co-ordinator.

[ ]  I have discussed this placement opportunity with my doctoral supervisor(s). They approve the project and dates proposed for the placement. I acknowledge that the GUDTP will contact them to confirm their support.

[ ]  I have passed the first formal milestone of my doctoral programme (this might be called a first-year review or transfer of status).

[ ]  I have sought guidance on and taken into consideration any VISA requirements that apply to this placement.

[ ]  I have read the GUDTP guidance on placements and completed this application to the best of my ability. All information provided in this application is true and accurate.

**For overseas placements only:**

[ ]  I have consulted the Foreign, Commonwealth, and Development Office (FCDO) Travel Advice. The FCDO advises

[ ]  that the country is safe for travel.

[ ]  against travel to part of the country. I will not be visiting the affected area(s).\*

[ ]  against travel to the country.

For foreign nationals/students with dual nationality only:

In addition to the FCDO, my government advises

[ ]  that the country is safe for travel.

[ ]  against travel to part of the country. I will not be visiting the affected area(s).\*

[ ]  against travel to the country.

\* I am providing further information in response to question D5.

**I am attaching to this application**

[ ]  Placement project plan signed by the Host

[ ]  Cost estimates and comparisons to demonstrate value for money

[ ]  Departmental Risk Assessment Approval

[ ]  Travel Insurance Confirmation (Required only in case of overseas travel)

**If my application for support is approved, I agree to**

[ ]  undertake the placement in a professional manner and fulfil the demands of the placement, as laid out in this Placement Project Plan, to the best of my ability.

[ ]  communicate regularly with the assigned point of contact within the Host organisation and discuss with them any specific needs or difficulties that might affect me while on the placement.

[ ]  advise the GUDTP Placements and Professional Skills Co-ordinator (placements.gudtp@socsci.ox.ac.uk) if any difficulties arise before or during a placement, and if the duration of the placement changes regardless of the reason.

[ ]  provide feedback to the GUDTP about my placement by completing a short survey. This is separate to the DTP 2 assessment requirement.

[ ]  honour any Intellectual Property and Confidentiality agreement signed by the University and the Host about this placement project.

[ ]  treat any of the Host’s procedures, projects, research, or other information of which I become aware in the course of the placement and which are unrelated to the placement as strictly confidential and will not disclose such information to any person without express written permission from the Host supervisor.

[ ]  comply with all work rules, policies, health and safety, and other regulations reasonably requested and communicated to me by the Host.

# STUDENT APPLICANT DETAILS

Click to enter Full Name

Click to enter Institutional E-mail Address

Click to enter University

Click to enter Department/School/Faculty

**GUDTP Studentship Start Year:** Click to enter Year

**End Date of GUDTP Award:** Click or tap to enter a date.

**Mode of Study:** Choose an item.

# PRIMARY ACADEMIC SUPERVISOR DETAILS

Click to enter Full Name

Click to enter Institutional E-mail Address

# PLACEMENT HOST DETAILS

Click to enter Organisation Name

Click to enter Company/Charity Number

Click to enter Address

Click to enter Website

## Placement Contact/Supervisor

Click to enter Full Name

Click to enter Role in Organisation

Click to enter Professional E-Mail Address

Click to enter Professional Telephone No.

# CASE FOR SUPPORT

**E1. Please explain how this placement will contribute to your professional and personal development. Please list any specific skills and experience you aim to gain by undertaking this placement, as well as opportunities otherwise inaccessible to you (e.g., sector-understanding or networking). If you propose an overseas placement, please explain why you cannot acquire the same skills or equivalent experience domestically.**

**Please try to reference your Development Needs Analysis (DNA) when answering this question. If there is any change between your last DNA responses and your current needs, please let us know what informs your current professional development priorities.**

(150-700 words).

Click or tap here to enter text.

**E2. Please let us know if there is any overlap between your research interests and the placement project. If the placement project addresses themes or research questions similar to your doctorate, please explain how you will ensure that the two projects remain separate (e.g. you will not use in your thesis any data made available to you as part of the placement) and avoid unwanted disclosure of intellectual property during and after the placement.** (Up to 200 words).

Click or tap here to enter text.

**E3. If in your project plan you have indicated that you wish to apply for GUDTP funding to support additional costs incurred by this placement, please provide here any information that we should consider while reviewing your application and accompanying documents. For instance, do you expect to have accommodation costs at home while undertaking an in-person placement in a different location? Do you have access needs or caring responsibilities that increase your costs? Please explain concisely how your application demonstrates value for money.** (Up to 300 words)

Click or tap here to enter text.

**E4. If you are providing your application for review within 1 month of the intended start date of the activity, please explain the reasons for the delay. As we cannot guarantee that it will be possible to process the application on time, please show how you have considered alternatives. For instance, have you discussed with the Host the possibility of postponing the start of the placement?** (Up to 150 words)

Click or tap here to enter text.

**E5. Is there anything else you would like to tell us in support of your application? If there are documents missing from your application, please explain here the reasons and when these will be available. If the FCDO advises against travel to *part* of the country you propose to visit, please explain here how you will avoid the affected area(s).**

Click or tap here to enter text.

# STUDENT SIGNATURE

Signed



Click to enter Print Name

Click or tap to enter a date.

# APPROVAL (Internal use only)

Recommended by:

[ ]  GUDTP Placements and Professional Skills Co-ordinator

[ ]  GUDTP Co-ordinator, University of Oxford/Postgraduate Research Manager, FASS, Open University/DTP Manager, Brunel London

Approved by the GUDTP Director at Click to enter DTP Institution

Signed

Comments for post-award consideration:



Click to enter Print Name

Click or tap to enter a date.