

## **COLLABORATIVE STUDENTSHIP SIGN-UP FORM**

**PLEASE RETURN FORM INCLUDING ALL SIGNATURES TO UCL RESEARCH SERVICES  
WITHIN 30 DAYS**

- 1. Please use a separate form for each Studentship*
- 2. CASE Agents only, insert your organisation name*
- 3. Company name (non academic project partner)*
- 4. Department (academic project partner)*

**Project Partner Supervisor Details (if different from above)**

Title		Initial		Surname	
Full Address					
Post Code					
Telephone				Email	

**University College London Supervisor Details**

Title		Initial		Surname	
Department					
Address					
Post Code					
Telephone				Email	
Signed					Date

**University College London Administrative Authority (Research Services)**

I certify that the university intends to appoint a student to this project with the Supervisors as detailed above.					
Title		Initial		Surname	
Position Held		Date		Signed	

**Academic Partner: Please complete all relevant sections, including signatures and forward to –**

**Sector Partner: Please complete all relevant sections, including signatures and forward completed hard copy document to the University College London Administrative Authority, at the address at the top of this document.**

If, for any reason you are unable to take up this Collaborative Studentship, please inform us so that we can re-allocate the funding to a waiting programme.

**A studentship agreement will be generated for signature by UCL and the Project Partner organisation once completed setting out the specific terms of the studentship and the EPSRC contribution is confirmed.**