

# Student Application Form - 2026-27

## Form Preview

### 2026-27 ACT Government Vacation Study Program - Student Application Form

\* indicates a required field

#### Student details

**Legal name: \***

Please enter your full legal name as shown on your driver's licence, passport or other official ID

**Preferred name:**

If different from your legal name

**Current residential address: \***

**Telephone: \***

**Email address: \***

#### University Details

**Institution: \***

**Study discipline: \***

**Current year of study: \***

**Student number: \***

**Do you identify as Aboriginal or Torres Strait Islander? \***

- ☐ No  
☐ Aboriginal

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☐ Torres Strait Islander

### Previous ACT Government Account

**Have you previously undertaken a placement, internship, employment, work experience program, or other engagement with the ACT Government? \***

- ☐ Yes  
☐ No

**Please provide details of the previous ACT Government directorate/agency and the approximate dates of your placement or employment**

In alignment with [Better Together: A strategic plan for research in the ACT health system](#), ACT Health and Community Services Directorate is committed to providing access to health and medical research career opportunities for Aboriginal and Torres Strait Islander people. De-identified data collected from this form may be reported as part of overall Vacation Study Program reporting over time. People who identify as Aboriginal or Torres Strait Islander on this form may also be offered opportunities such as connecting with peers and mentors in the future (if opportunities arise and are supported and endorsed by the ACT Health Directorate).

### Research project you are applying for

Please note: students may apply for up to 4 projects, but can only complete one placement.

**Please select the project you are applying for: \***

**Please explain why you want to participate in this project and what qualities, skills and knowledge you will bring to the project? \***

**Do you wish to apply for another project?**

- ☐ Yes

### Preference 2

**Please select the project you are applying for:**

**Please explain why you want to participate in this project and what qualities, skills and knowledge you will bring to the project?**

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**Do you wish to apply for another project?**

☐ Yes

Preference 3

**Please select the project you are applying for:**

**Please explain why you want to participate in this project and what qualities, skills and knowledge you will bring to the project?**

**Do you wish to apply for another project?**

☐ Yes

Preference 4

**Please select the project you are applying for:**

**Please explain why you want to participate in this project and what qualities, skills and knowledge you will bring to the project?**

Program Eligibility and Requirements

**This program runs from November 2026 through to February 2027. You will be expected to be based in the ACT for the duration of the project. Please indicate any availability restrictions during this period: \***

\*

☐ I acknowledge that I am required to be based in the ACT for the duration of the placement to participate in the program's face-to-face activities.

\*

☐ I acknowledge that attendance at all face-to-face sessions, workshops and training activities is mandatory and required for successful completion of the program

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☐ I acknowledge that this is an in-person placement and that remote participation is not available.

\*

☐ I confirm that I have not previously participated in the ACT Government Vacation Study Program.

\*

☐ I declare that the information I have provided in this form, and any supporting documents attached, is true, complete and correct to the best of my knowledge. I understand that by providing false or misleading information, I may lose my placement.

**Please attach current curriculum vitae: \***

Attach a file: