#### Western Sydney University Occupational Therapy Program

**Year 2 project based professional practice**

***Project Expression of Interest 2021***

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| **Name of organisation** |  | |
| **ABN** |  | |
| **Contact person** | Name:  Role:  Telephone:  Email: | Will this contact person be the student/s supervisor?  Yes  No  If no, please provide supervisor details and professional background: |
| **Physical Address** |  | If there are other locations/sites that student/s may need to attend during the placement please provide details: |
| **Postal address** |  |
| **Project Title** |  | |
| Project description Include tasks to be completed; skills/ knowledge/tools required for the task; anticipated outcomes/ deliverables etc |  | |
| **Attendance requirements**  The project should include a mix of on-site and self-directed work. Please describe the anticipated attendance requirements, including whether there are specific days of the week or dates the student/s need to be available. |  | |
| **Number of students**  It is usual for students to undertake projects in pairs. Should your project be larger in scope, additional pairs are welcome. |  | |

**Please return your project brief by email to Dr Nicole Sharp** [**n.sharp@westernsydney.edu.au**](mailto:n.sharp@westernsydney.edu.au)**.**

**For any enquiries contact Nicole or Amanda Young, clinical placement officer, on 4620 3550 or** [**OTplacement@westernsydney.edu.au**](mailto:OTplacement@westernsydney.edu.au)

**PLEASE RETURN BY FRIDAY 14th May 2021**