How to fill out the Observership Student Placement Agreement

1. Determine if your placement will be Clinical or Research in nature, and then download/print out the appropriate SPA from the Observership website, located under the Documentation tab.

   Note: Majority of placements are classified as Clinical. Please email the Placements team if you are unsure.

2. Fill out the host Preceptor details on the top of the SPA, along with the date, then your student details and placements dates where indicated on the form.

3. Have your host Preceptor fill out and sign the designated section on page 2.
   (Please leave the box below this blank for the Faculty to fill out once you have submitted your form.)

4. Completely fill out the Appendix 1 located on page 3. Please fill out each section clearly and include as much information as possible.

5. Please upload the SPA as a whole document to the Placements system when submitting your application. This includes the terms and conditions on the remaining pages.

If you have any questions, please do not hesitate to contact the Placements team on medplacements@uq.edu.au
Dear Sir/Madam,

UQ Medicine Year 1 Observership Placement ("Placement")

(Insert the details of your Preceptor here)

(Insert your name and student number)

(Insert the name of the host organisation here)

(Insert placement dates here)

I understand that your organization is willing to accept the Placement of the Student at [.................] ("Facility"). The Placement has been approved by UQ and will commence on [.................] and continue until [.................].

The Faculty of Medicine Placements team is the UQ Placement Co-ordinator and will be your contact person in relation to the Student’s participation in the Placement (see Appendix 1 for further details).

By signing this letter your organisation agrees to provide the Student with a Placement on the terms of this letter and UQ’s Standard Terms and Conditions for Placements (Observerships) which is attached at Appendix 2. The date of this Agreement will be the date of your signature indicated below or if there is no date, the date of this letter.

I would be grateful if you would sign and return the attached copy of this letter.

Yours sincerely

Tammy Smith
Phase 1 Academic Coordinator,
Faculty of Medicine

Copy:
Your preceptor is to fill out and sign this section

Preceptor to complete:

I have read and understood the terms and conditions of this letter and attachment/s appended or referred to, and I agree to and accept them.

Duly authorised, for and on behalf of [……………………………………………… (“Provider”)]

Signed: ........................................ Position: .........................................................

Name: .......................................................... Date:........................................

The Faculty of Medicine, University of Queensland to complete:

I have read and understood the terms and conditions of this letter and attachment/s appended or referred to, and I agree to and accept them.

Duly authorised, for and on behalf of [……………………………………………… (“Provider”)]

Signed: ........................................ Position: .........................................................

Name: .......................................................... Date:........................................

Please leave this section blank for the Faculty of Medicine to complete once you submit
Please fully complete Appendix 1 and then upload the entire document, including attached terms and conditions to the Placements system.

**APPENDIX 1 – PLACEMENT DETAILS**

<table>
<thead>
<tr>
<th><strong>Appendix 1</strong></th>
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</thead>
<tbody>
<tr>
<td>Student Name</td>
</tr>
<tr>
<td>Student Number</td>
</tr>
<tr>
<td>Placement Start Date</td>
</tr>
<tr>
<td>Placement End Date</td>
</tr>
<tr>
<td>Full Organisation Name</td>
</tr>
<tr>
<td>Full Organisation Address</td>
</tr>
<tr>
<td>Placement Discipline/Speciality</td>
</tr>
<tr>
<td>Supervisor Name</td>
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<tr>
<td>Supervisor Email</td>
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</tbody>
</table>

Please return Student Placement Agreement (SPA) to the student or Faculty of Medicine Placements team. If you have any further questions please do not hesitate to contact:

The Placements team

The University of Queensland
E  med.placements@uq.edu.au  P  +61 7 3365 5327