

Activity Proposal Form

I propose that the activity outlined in PART B be added to the NEA Activity List as a new activity. Feb 2008

PART A: Applicant Details

Name: _____ Phone: _____

Postal Address: _____ P/Code: _____

Faculty: _____ Email: _____

Signature: _____ Are you: Student Staff Member of the community

Date: ____/____/____ This Activity is recommended for: Internal Students External

PART B: Activity Details

Activity Type: Event Training Seminar/Workshop Position Work
 Other - please specify _____

Training was required for the Activity): Yes No

*(*You may be eligible for more points if you answered 'yes' - a separate form is required).*

Activity/Position Title: _____

Activity Provider: _____

Activity Provider details:

Contact person: _____ Phone: _____

Postal Address: _____ P/Code: _____

Email: _____

Activity/Position details:

List the responsibilities/duties held (or attach position statement). *If this form is about having Training recognised by the NEA, indicate what was involved in the Training (including assessment):*

Number of hours involved in the Activity/Position: _____

Activity time / date / venue: (please specify) _____

***Please attach documentation about the Activity to this form** (e.g. info flyer, pamphlet, signed statement from supervisor/Activity Provider)
AND provide a signature from the Activity Provider/Supervisor below.

Activity Provider Declaration: This information accurately represents this Activity

Activity Provider Signature: _____ **Date:** ____/____/____

Please complete and return this form to the NEA Office: NEA Project Assistant, Top Floor, Teaching & Learning Centre, University of New England, Armidale, NSW, 2351.

PART C: Admin

Approved: Yes / No **Date:** _____ / _____ / _____

Activity / Position Title: _____

Activity / Position Provider: _____

Category: _____

Points: _____ **Points justification:** _____

Evidence Type: Stamp / Certificate / APS / Attendance Record / Other (state) _____

Contacted Applicant

Contacted Activity Provider

Added to Activity List

Notified NEA students

File

Signature: _____ **Date:** _____ / _____ / _____