**Approval for Turing Scheme Placement for Studies/Work**

To be completed **IN FULL** by the Departmental Turing Coordinator/Placement Tutor

|  |  |
| --- | --- |
| Name of student |  |
| Ulster student number |  |
| Name of host institution/s and/or host organisation/s  | 1.2.  |
| Start date of placement |  |
| End date of placement  |  |
| Qualification to be gained during Turing Scheme placement (please tick) | ¨ Diploma in International Academic Studies¨ Diploma in Professional Practice (International)¨ Credit for modules taken in place of modules at Ulster¨ Other (Please specify)  |
| Module on which the student will be registered at Ulster during his/her Turing Scheme placement |  |
| Number of credits to be achieved during Turing Scheme placement (if applicable) |  |
| Is the student in good academic standing with no resits pending? (please tick)  | ¨ Yes¨ No (please provide details) |

**I confirm that these details are correct and that the student above is approved for a Turing Scheme Placement for Studies/Work.**

|  |  |
| --- | --- |
| Name (please print): |  |
| School/Department: |  |
| Date |  | Signature |  |