



# The Fisheries Society of the British Isles (FSBI)

UK Registered Charity 256475

## FSBI Internship Application

**IMPORTANT NOTE:** This form has been constructed so that the text cannot exceed the character limit defined by the Society for each section. Additional text beyond what is in defined text boxes will be ignored.

### 1. Applicant Information

Last name

First name(s)

	Permanent	College/Work
Address		
Post code		
Telephone		
Email (personal & university)		

Degree title

Institution

Year of study

Academic performance (grades or % marks)

Relevant work previously undertaken

Please tell us a little about yourself and your career ambitions (maximum 300 characters)

## 2. The Proposed Research Project

Title (maximum 100 characters)

Name of supervisor(s) (If more than one, indicate main supervisor with\*)


Department/host institution in the UK or Ireland where internship will be held

Start date

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
DD		MM		YYYY

Finish date

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
DD		MM		YYYY

Duration in weeks

Total funding requested

£

(check Internship web page for maximum allowable sum)

### **Details of the Proposed Research Project**

Use this section to provide a brief background, aims of the project and details of the investigation to be carried out and methods to be used. You can also include details of funds that will be made available by your supervisor to support the research expenses for the project. Please include appropriate figures, tables or references and a timetable for the project. (maximum 3000 characters)

Please outline why you have decided to conduct this project and how it will benefit you in your degree course and in your career ambitions (maximum 300 characters)

I hereby declare that the above information is correct, to the best of my knowledge. I have read the Information & Conditions document available from the FSBI Summer Internships web page and I will abide by the conditions of award. Insert a X in the box to verify your agreement.

**Signature** (Type your name in the format you use for your signature)

**Date**

	/		/	
D D		M M		Y Y Y Y

### 3. Comments by Supervisor

(Please include general comments on the proposed project, a brief reference for the student, why you think she/he will benefit from an internship, and confirm your willingness and availability to supervise the student) (maximum 2500 characters)

I understand that awards will not be granted to support undergraduate work that forms part of a degree programme or for participation in an expedition. I understand that I am responsible for any research costs associated with the intern project. I will ensure that the student receives appropriate Health and Safety training, is insured by the Host Institution to conduct the work and that all work is risk-assessed, ethically-reviewed if required and approved by the Host Institution.

**Signature** (Type your name in the format you use for your signature)

**Date**

	/		/	
DD		MM		YYYY

Last name

First name(s)

Title

Position

Address

Telephone

Email

Fax

#### 4. Approval by Head of Department/School/Institute

(By signing this form, I confirm that this application has my support and that adequate resources are available within the Department for the work to be completed)

**Signature** (Type your name in the format you use for your signature)

**Date:**

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
DD		MM		YYYY

Last name

First name(s)

Title

Address (if different from above)

Telephone

Email

Fax