

**ACICA / ADC INTERNSHIP APPLICATION FORM**

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| --- | --- |
| **Name** |  |
| **Date of Birth** |  |
| **Address** |  |
| **Telephone** |  |
| **Email** |  |
| **Professional Qualifications**  **(include name of institution and date of award)** |  |
| **Availability (days and timeframe)** |  |
| **Please describe your interest in arbitration and alternative dispute resolution and reasons for applying for an internship (alternatively this may be included in your cover letter)** |  |

I, ……………………………., confirm that the information provided in and annexed to my application for the ACICA/ADC internship programme is accurate and may be used by ACICA and ADC staff as required in connection with the consideration of my application.

Signature:

Date:

Applications should be sent by email to: [secretariat@acica.org.au](mailto:secretariat@acica.org.au) along with copies of a covering letter addressing the internship Criteria, a CV and current university transcript.