

THE UNIVERSITY OF MELBOURNE  
SCHOOL OF BEHAVIOURAL SCIENCES  
DEPARTMENT OF PSYCHOLOGY

## Test Materials Registration Form for External Students

Please complete this form and submit with Application To Borrow. This for only needs to be completed and submitted once.

### PERSONAL INFORMATION

Title: \_\_\_\_\_ Family Name: \_\_\_\_\_

Given Name/s: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Email: \_\_\_\_\_

Business Phone No.: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Mobile Phone No.: \_\_\_\_\_

### COURSE INFORMATION

Institution: \_\_\_\_\_

Course: \_\_\_\_\_ Student ID: \_\_\_\_\_

Year Level: \_\_\_\_\_ Expected date of Completion: \_\_\_\_\_

### SUPERVISOR'S INFORMATION

Supervisor: \_\_\_\_\_

Supervisor's signature: \_\_\_\_\_

Business Address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Preferred Email: \_\_\_\_\_

Contact Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_

For external supervisors please provide Registration Number: \_\_\_\_\_