

THE UNIVERSITY OF MELBOURNE
SCHOOL OF BEHAVIOURAL SCIENCE
DEPARTMENT OF PSYCHOLOGY

**Test Resource Centre Registration Form for
Research Assistants of the Psychology Department**

Please complete this form and submit to Phoebe Wilson
Psychology Reception - Level 12 Redmond Barry Building
Email: p.wilson@psych.unimelb.edu.au or phone: (03) 98344 7138

PERSONAL INFORMATION

Title: _____ Family Name: _____

Given Name/s: _____

Address: _____

_____ Postcode: _____

Email: _____

Business Phone No.: _____ Home Phone: _____

Mobile Phone No.: _____

COURSE INFORMATION

Course: _____ Student ID: _____

Year Level: _____ Expected date of Completion: _____

SUPERVISOR'S INFORMATION

Supervisor: _____

Supervisor's signature: _____

Contact Phone No.: _____ Email: _____