

Reimbursement application form for pharmacy students on placement

PLEASE NOTE: REIMBURSEMENT APPLICATIONS WILL NOT BE PROCESSED UNTIL AFTER THE STUDENT HAS COMMENCED THE ACTUAL PLACEMENT

Name	
Preferred name (if different from above)	
International Student Y/N	
Full time/Part time	
Gender	
Unit Code	
Total number of hours on Placement	
Name of Business where Placement Undertaken	
City/Location of Placement:	
Date of Placement:	
PHARIA Code: *See below	
Student ID #	Student Year Level
Please attach a document or email (no more than one page) outlining <ul style="list-style-type: none">• what you experienced on your placement and how it helped you understand the benefits/challenges or rural or remote practice• how the Placement Allowance assisted you to attend	

*PHARIA code can be found at: <http://gisca.adelaide.edu.au/projects/pharia.html>