

**Privacy Collection Notice - Students**

**1.** **Who We Are**

The Council of the Queensland Institute of Medical Research, trading as QIMR Berghofer ("we," "us," or "our") is committed to protecting your privacy in accordance with the *Information Privacy Act 2009* (Qld). Our Privacy Policy contains further information about how we collect, use, store and disclose your Personal Information.

**2. Why We Collect Your Information**

QIMR Berghofer collects personal information from students to manage and facilitate your placement, coordinate with your educational institution, ensure compliance with legal and safety requirements, communicate with you about your placement, and support your learning experience.

**3. Types of Personal Information We Collect**

We may collect information such as your name, contact details, educational background, emergency contact information, immigration information, health and medical information relevant to your placement, and any other information necessary to support your placement and wellbeing.

**4. How We Collect Information**

Where possible, we collect personal information directly from you. We may also receive information from your educational institution or placement coordinator, with your consent or as permitted by law.

**5. Legal Basis for Processing**

We collect and use your information only where:

* You have given consent;
* It is necessary to fulfil a contract or legal obligation; or
* It is required for legitimate educational and organisational purposes.

**6. Disclosure of Information**

We may share your information with:

* Your educational institution or placement coordinator;
* Service providers assisting with placement administration (e.g., IT, security);
* Government authorities (if required by law);
* Other parties as necessary to support your placement and comply with legal obligations.

**7. Overseas Transfers**

We may disclose your personal information to overseas recipients, including where you are enrolled at an international university and disclosure is necessary to facilitate or otherwise administer your placement. Such disclosure will only occur where:

* We are satisfied on reasonable grounds that the recipient is subject to privacy obligations substantially similar to those under Queensland law; or
* Another permitted situation under the *Information Privacy Act 2009* (Qld) applies.

Before any disclosure, we will take reasonable steps to ensure your personal information will be handled in accordance with the Queensland Privacy Principles (QPPs), including by contract or other binding arrangement.

****

**8. Data Breach Notification**

In the event of a data breach likely to cause harm, we will notify you and the Queensland Office of the Information Commissioner (OIC) as required by law.

**9. Access and Correction**

You have the right to:

* Request access to your personal information;
* Correct inaccurate or incomplete details.
* Contact our Privacy Officer at PrivacyOfficer@qimrb.edu.au to exercise these rights.

**10. Complaints**

If you believe we’ve breached privacy laws, contact our Privacy Officer. You may also lodge a complaint with the Queensland OIC:

Office of the Information Commissioner

Website: www.oic.qld.gov.au

Phone: 07 3234 7373

**11. Consequences of Not Providing Information**

If you choose not to provide required information, we may be unable to facilitate your placement or ensure your safety and compliance with placement requirements.

**12. Retention Period**

We retain your information only for as long as necessary to fulfil the purposes outlined in this notice or as required by law.

**Contact Us**

For privacy related inquiries, contact [PrivacyOfficer@qimrb.edu.au](mailto:PrivacyOfficer@qimrb.edu.au).

****

**PhD or PhD (Non-Review) Student Admission Form**

Use this form to apply to undertake research as a PhD Student at QIMR Berghofer.

***Please fill this form out electronically, then send it to your QIMR Berghofer supervisor as a word document to fill in section 2. When you get it back from them, combine it with all supporting documents into ONE PDF and email to*** [***Graduateeducation@qimrberghofer.edu.au***](mailto:Graduateeducation@qimrberghofer.edu.au)

**Processing times for Institute admission:**

|  |  |
| --- | --- |
| Student is enrolled in a Queensland University | 3 weeks |
| Student is enrolled in an Overseas University | 6 weeks |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Section 1: To be completed by student** | | | | | | | | | | | | | | |
| **Student Details** | | | | | | | | | | | | | | |
| Family name: | | |  | | | | | First Names: | | | | |  | |
|  | | |  | | | | |  | | | | |  | |
| Email Address: | | |  | | | | | Contact Number: | | | | |  | |
|  | | |  | | | | |  | | | | |  | |
| Are you a Review or Non-Review PhD student? | | | | | | | | | | |  | | | |
|  | | |  | | | | |  | | | | |  | |
| Highest Awarded Degree: | | |  | | | | | University: | | | | |  | |
|  | | |  | | | | |  | | | | |  | |
| Date Awarded: | | |  | | | | |  | | | | |  | |
|  | | | | | | | | | | | | | | |
| **Enrolment Details** | | | | | | | | | | | | | | |
| Project Title (compulsory): | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| University Enrolment: | Full-time  Part-time | | | | | | Attendance at QIMR Berghofer: | | | | | Full-time  Part-time | | |
|  | | | | | | | | | | | | | | |
| University: |  | | | | | | University School: | | | | |  | | |
|  | | | | | | | | | | | | | | |
| Proposed Start Date at Institute: | |  | | | | | Proposed End Date at Institute: | | | | |  | | |
|  | |  | | | | |  | | | | |  | | |
| Principal Supervisor: | |  | | | | | Email Address: | | | | |  | | |
|  | |  | | | | |  | | | | |  | | |
| QIMR Berghofer Supervisor:  *(If Principal Supervisor is not at QIMR Berghofer)* | |  | | | | | Email Address: | | | | |  | | |
|  | |  | | | | |  | | | | |  | | |
| Associate Supervisor 1: | |  | | | | | Email Address: | | | | |  | | |
|  | |  | | | | |  | | | | |  | | |
| Associate Supervisor 2: | |  | | | | | Email Address: | | | | |  | | |
|  | |  | | | | |  | | | | |  | | |
| Associate Supervisor 3: | |  | | | | | Email Address: | | | | |  | | |
|  | | | | | | | | | | | | | | |
| **Funding** | | | | | | | | | | | | | | |
| Source of Scholarship/Living Allowance: | | | |  | | | | | | Status: | | | |  |
|  | | | |  | | | | | |  | | | |  |
| Scholarship Value (per annum): | | | |  | | | | | | Years of Funding: | | | |  |
|  | | | | | | | | | | | | | | |
| **Check List - Please tick** | | | | | | | | | | | | | | |
| * Student IP Deed (compulsory) | | | | | |  | | | | | | | | |
| * Academic Curriculum Vitae (compulsory) | | | | | |  | | | | | | | | |
| * Project outline (compulsory) | | | | | | (no more than 1 page in length) | | | | | | | | |
| * Copy of passport (compulsory for all students) & visa (if international student) | | | | | |  | | | | | | | | |
| * Proof of university enrolment (compulsory) | | | | | | (this must be provided before Institute induction) | | | | | | | | |
| * A copy of all University Scholarship or admission offers (compulsory) | | | | | |  | | | | | | | | |
| * Read the privacy collection notice document   (compulsory)  **Additional Information:** | | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| **Section 2: To be completed by Institute Supervisor (compulsory)** | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| If your student is **self-funded** please send a separate letter or email that justifies how their academic record merits acceptance and how the student will self-fund. | | | | |  | | | | | | | | | |
| Please indicate current numbers in the lab: | | | | | **PhD/MPhil**  **Post-docs** | | | |  | | | | | |
|  | | | | | | | | | | | | | | |
| Who will give day to day supervision? | | | | |  | | | | | | | | | |
|  | | | | |  | | | | | | | | | |
| Source of maintenance (QIMR Berghofer cost centre) | | | | |  | | | | | | | | | |
|  | | | | |  | | | | | | | | | |
| How many years maintenance funding is available? | | | | |  | | | | | | | | | |
|  | | | | |  | | | | | | | | | |
| If less than 1.5 years, please provide plan for funding after this: | | | | |  | | | | | | | | | |
|  | | | | |  | | | | | | | | | |
| Will this student carry out Institute milestone reviews? ( If no – access is Monday to Friday only) | | | | |  | | | | | | | | | |
|  | | | | |  | | | | | | | | | |
| Do you have ethics approval for this project? | | | | |  | | | | | | | | | |
|  | | | | |  | | | | | | | | | |
| Does this project need a MTA or DTA? | | | | |  | | | | | | | | | |
|  | | | | |  | | | | | | | | | |
| Are you offering financial support for this student? (if yes please provide cost centre number below) | | | | |  | | | | | | | | | |
|  | | | | |  | | | | | | | | | |
| If you selected yes to the above question, what is the Cost centre number? | | | | |  | | | | | | | | | |
|  | | | | |  | | | | | | | | | |
| Do you have the grants officer approval to use this cost centre for this purpose? (if yes, please provide the email correspondence separately) | | | | |  | | | | | | | | | |

|  |  |
| --- | --- |
| Do you have a personal relationship with the prospective student or a co-supervisor that could create an actual, potential or perceived conflict of interest in your role as a supervisor (refer to the [Conflict of Interest Policy](https://intranet.qimrberghofer.edu.au/media/2wqjrmm2/conflict-of-interest_policy_council-approved_20240213.pdf) and [Procedure](https://intranet.qimrberghofer.edu.au/media/wvxj4y3r/conflict-of-interest-procedure_2024-02-20_dir_ceo_approved.pdf) for more information)? |  |

*(****If yes to the above****, you must formally register this conflict through the Institute’s COI system.  An approved conflict management plan must be in place before the student’s admission will proceed).*