

STRATHCLYDE INSTITUTE OF PHARMACY & BIOMEDICAL SCIENCES

Summer Placement Application Form

Surname		First Name	
Reg. No.		Nationality	
Email		Degree Course	

Please indicate a preferred research topic and/or supervisor	
(please note that preference is for guidance only; we cannot guarantee to offer you a specific placement)	

<p>Supporting statement (150-word limit)</p> <p>(This should briefly outline why you would be a good candidate for a summer placement, what you hope to gain from it and how this will support your career development. Please also provide any other information that is relevant to your application)</p>
Any other relevant information?

FORM SHOULD BE EMAILED TO PHILIP BROWN at philip.brown@strath.ac.uk

DEADLINE IS MONDAY 3rd NOVEMBER 2025