|  |  |
| --- | --- |
| **Full name:** |  |
| **Year of study:** |  |
| **Degree programme:** |  |
| **Please indicate which area of the project you are interested in (tick all that apply)** | Assessment |  | Academic Support |  |
| Community/Partnership |  |  |
|  |
| **Please tell us in less than 100 words, why you would like to be involved in this project.** |
|  |

**Faculty of Arts**

**NSS Student Partnership Project**