Study Abroad Application Form



CRICOS Provider Number: 01595D

To complete this form:

- Answer all questions on the form—No application fee
- Use BLOCK LETTERS and tick check boxes where required
- Do not complete this form if you are an Australian/New Zealand citizen or an Australian Permanent Resident

Please return form to:

USC International
University of the Sunshine Coast—ML17
Maroochydore DC Qld 4558 Australia
Fax: +61 7 5430 2836

Email: admissionsint@usc.edu.au

Personal details			
Have you been previously e	nrolled at the University of the Sunshi	ne Coast? No Yes	-Student ID number:
Title: Mr/Mrs/Miss/Ms/Dr/O	Other Date of Birth: _	/	/Month/Year Sex: Male Female
Family name:	(iven names:	
Country of Birth:	(Citizenship:	
Passport Number:	Date of Issu	DD / MM / YYYY	Country of Issue:
What visa are you applying	for? Student Visa Extensi	on to Student Visa—subclass: _	Other:
Address / contact details			
Number and street:			
Town/City:	State:	Country:	
•			
Telephone: Country Area	Mobile:	Fax	Country Area Local number
	me country (if different from above		
Number and street:		Town/City:	State:
Country:	Postcode/Zip:	Telephone:	Country Area Local number
English language proficie			Country Area Local Humber
☐ Yes —English is my first (Evidence of first language	may be requested) If English is	= =	fill in the following and attach
☐ English proficiency test	taken (eg Cambridge, IELTS, TOEFL, DA	AAD):Score:	Date:
☐ I intend to sit for an English proficiency test:			Test date:
I illitella to sit for all Elli	<i>y</i>		DD / MAN / 1000/
☐ I applied for/am current	tly taking an English Language Program	m at USC.	DD / MM / YYYY
☐ I applied for/am current☐ I have successfully com	tly taking an English Language Prograi pleted a course delivered entirely in El	n at USC. nglish, within the last five years	
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Previous and current studies (eg Secondary School, TAFE, University) Institution/School Name of Award/Qualification Year completed Country or year to be completed Current studies Previous studies Documentary evidence of previous and current studies must be attached including official academic transcripts (statement of results) showing courses in progress. Documents not in English must be accompanied by certified English translations. Support services Do you have a disability, impairment or long-term medical condition that may affect your studies? □ No ☐ Yes ☐ Hearing ☐ Learning ☐ Mobility ☐ Vision ☐ Medical ☐ Other This information is used in a confidential manner by Student Services to assist you in accessing support services. **Declaration** I agree to pay all fees for which I am liable, and have read and agree to abide by the University of the Sunshine Coast's Student rules, policies, procedures and guidelines and conditions of enrolment, including the Student Fees and Charges Policy, and Student Fees, Charges and Refunds Procedures, which are available on the USC website www.usc.edu.au/students/international/rules I consent to information collected about me on this form being disclosed if authorised or required by law, and/or in certain circumstances the Australian Government and/or designated authorities authorised by the University, in accordance with the University's Privacy Plan available at www.usc.edu.au/privacyplan I declare that the information I have provided on this application form is true and complete and authorise the University of the Sunshine Coast to obtain further information required to complete enrolment. I agree to immediately notify the University of the Sunshine Coast of any changes to the information I have given in this application form, including a change I understand the University of the Sunshine Coast reserves the right to vary or reverse any decision regarding admission or enrolment made on the basis of incorrect or incomplete information. I understand that I cannot change my education provider during the first six months of my course, except in limited circumstances, without a written letter of release from the University of the Sunshine Coast and an official offer of place from another registered provider. I agree that I am fully responsible for all education and living expenses, both for myself and for all my dependants that accompany me while I am studying at the University of the Sunshine Coast, and am aware that school-aged dependants accompanying me will be required to pay full fees at a private or government school in Australia. I understand that my rights and responsibilities as a student studying in Australia are governed by the Education Services for Overseas Students (ESOS) Act 2000 and the National Code 2007, outlined at http://aei.dest.gov.au/aei/esos This agreement, and the availability of complaints and appeals processes, does not remove my right to take action under Australia's consumer protection laws. I understand and accept the conditions set out in the declaration above Name _Date: ___ DD / MM / YYYY Checklist Home Institution/Agent details Have you completed all sections of this application form? Have you attached certified copies of English proficiency? Have you attached certified/notarised academic transcripts? Have you attached certified/notarised copies of graduation certificates? Have you read and signed the Declaration? ☐ Have you attached certified/notarised copies of official English translations

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of any documents created in a language other than English.

I heard about USC from: