



## 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, Australian Permanent Resident, or a Permanent Humanitarian visa holder.

# Please return form to:

USC International University of the Sunshine Coast—ML17 MAROOCHYDORE DC QLD 4558 AUSTRALIA Fax: +61 7 5430 2836 Email: study@usc.edu.au

Email application Print and fax

# 1.0 PERSONAL DETAILS

Have you been previously enrolled at the Ur	niversity of the Sunshine Coast	? 🖸 N	lo 🖸 Yes–Stud	ent ID number:			
Title: Mr / Mrs / Miss / Ms / Dr / Other:	Date of birth:	Day	Month	)	Year	Sex: 🖸 Male	O Female
(as s	shown on passport)		(eg 21 / January	/ 1979)			
Family name:			Given names:				
Country of birth:			Citizenship:				
Passport number:	Date of issue: DD / MM / Y	YYY	Country of issue:				
What visa are you applying for? 🖸 Stude	ent visa 🖸 Extension to Stude	ent visa-	-subclass:		Othe	er:	
Do you need additional OSHC* for accomp	anying family members? (fees	apply):	🖸 Yes 🖸 No	Type of cover	: 🖸 Dua	l family# D M	ulti family†
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\* Overseas Student Health Cover. # Either one adult spouse or recognised de-facto partner or one or more dependant children accompanying the valid Student visa holder. + More than one dependant which can only include one adult spouse or recognised de-facto partner and one or more dependant children accompanying the valid Student visa holder.

## Address / contact details

Number and street:					
Town/City:		State:	Country:		
Postcode/Zip:		Email:	@		
Telephone: Country Area Local number	Mobile:		Fax: Country Area Local number		

### Permanent Address in home country (if different from above)

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Number and street:	Town/City:		State:			
Country:	Postcode/Zip:	Telephone:	Country Area Local number			
2.0 ENGLISH LANGUAGE PROFICIENCY						
Yes-English is my first language (Evidence of first language may be requested) No-my first language is:						
If English is <b>not</b> your first language, please fill in the following and attach documentary evidence.						
English proficiency test taken (eg Cambridge, IELTS, TOEFL, D.	Score:	Date: DD / MM / YYYY				
I intend to sit for an English proficiency test: Test date: DD / MM / YY						
I applied for/am currently taking an English Language Program at USC.						
<ul> <li>I have successfully completed a course delivered entirely in English, within the last five years, for:</li> <li>two years full-time secondary study</li> <li>one year full-time University level study</li> <li>one year full-time other post-secondary study</li> </ul>						
3.0 COURSES PREFERRED   Visit the USC website at www.usc.edu.au/studyabroad for course list (course offerings are subject to change).						
I want to study for: O one O two semesters Commencin	ng: 🖸 Semester 1 (Feb-June)	Year Ser	nester 2 (July–Nov) Year			

Course Code (eg COR109)	Course title (eg Communication and Thought)	Semester of offer (1 or 2)	Home Institution approval (if required)	





# 4.0 PREVIOUS and CURRENT STUDIES (eg Secondary School, TAFE, University) Institution / School Name of Award / Qualification Year completed or year to be completed Country Current studies Image: Current studies Image: Current studies Image: Current studies Image: Current studies Previous studies Image: Current studies

Documentary evidence of previous and current studies must be attached including full academic transcripts (statement of results and award certificates). Documents not in English must be accompanied by certified English translations.

# 5.0 SUPPORT SERVICES

Do you have a disability, impairment or long-term medical condition, which may affect your studies?

 $\bigcirc$  No  $\bigcirc$  Yes  $\rightarrow$   $\bigcirc$  Hearing  $\bigcirc$  Learning  $\bigcirc$  Mobility  $\bigcirc$  Vision  $\bigcirc$  Medical  $\bigcirc$  Other:

This information is used in a confidential manner by Student Life and Learning to assist you in accessing support services as required.

# 6.0 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/international-student-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 of address.

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 a place from another registered education 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 **www.aei.gov.au/Regulatory-Information** 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:			

Email application Print and fax

Date:

# CHECKLIST

- 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 of any documents created in a language other than English?

I heard about USC from:

# HOME INSTITUTION / AGENT DETAILS

AVISTA Education Regeringsgatan 79 Box 7723 103 95 Stockholm, Sweden

Tel: +46 (0)8 440 16 30 E-mail: info@avista.nu