

DIPLOMA APPLICATION FORM

To complete this form:

- Answer all questions on the form—No application fee.
- Use BLOCK LETTERS and tick check boxes where required.

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

1.0 PERSONAL DETAILS

Have you been previously enrolled at the University of the Sunshine Coast? No Yes—Student ID number:

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Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other:	Date of birth:	Day	Month	Year	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
<small>(as shown on passport)</small>	<small>(eg 21 / January / 1979)</small>				

Family name:	Given names:	
Country of birth:	Citizenship:	
Passport number:	Date of issue: DD / MM / YYYY	Country of issue:
What visa are you applying for? <input type="checkbox"/> Student visa <input type="checkbox"/> Extension to Student visa—subclass:		<input type="checkbox"/> Other:
Do you require OSHC*?: <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of cover: <input type="checkbox"/> Single cover <input type="checkbox"/> Dual family# <input type="checkbox"/> Multi family†	<input type="checkbox"/> I will arrange my own OSHC cover

If purchased through USC, OSHC Essentials cover will be provided by our preferred provider Allianz Global Assistance.

* 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.

2.0 ADDRESS / CONTACT DETAILS

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)

Number and street:	Town/City:	State:
Country:	Postcode/Zip:	Telephone: Country Area Local number

3.0 ENGLISH LANGUAGE PROFICIENCY

Yes—English is my first language (Evidence of first language may be requested) **No**—my first language is:

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If English is **not** your first language, please fill in the following and attach documentary evidence.

English proficiency test taken (eg Cambridge, IELTS, TOEFL, DAAD):	Score:	Date: DD / MM / YYYY
<input type="checkbox"/> I intend to sit for an English proficiency test:	Test date: DD / MM / YYYY	
<input type="checkbox"/> I applied for/am currently taking an English Language Program at USC.		
<input type="checkbox"/> I have successfully completed a course delivered entirely in English, within the last five years, for:		
<input type="checkbox"/> two years full-time secondary study <input type="checkbox"/> one year full-time University level study <input type="checkbox"/> one year full-time other post-secondary study		

4.0 DIPLOMA PROGRAM

Please specify which Diploma program you are applying for:

Do you wish to apply for credit transfer in recognition of prior learning? Yes No

➔ If **yes**, provide official course outlines of courses you would like considered for credit transfer.

5.0 COURSES PREFERRED | Visit the "What will I study" tab of your chosen Diploma program page on the USC website for course listings.

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

6.0 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			
Previous 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.

7.0 SUPPORT SERVICES

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

No Yes → Hearing Learning Mobility Vision Medical Other:

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

8.0 DECLARATION

I understand that the information collected in this form is used to determine whether my application to USC will be accepted. Information provided on this form will also be used to administer my enrolment and to provide me with other USC services (including information released to USC's OSHC provider Allianz Global Assistance).

I authorise, where I have submitted my application to USC via a third party (an education agent/partner institution) to USC communicating with the third party regarding my application and enrolment to USC.

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 (where I have submitted this application to USC through a USC partner institution) that on completion of my Study Abroad program to an official transcript being provided to my home institution.

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 Information Privacy—Governing policy available at www.usc.edu.au/privacyplan and where applicable, the Director of the Tuition Protection Scheme, pursuant to obligations under the *Education Services for Overseas Students (ESOS) Act 2000* and the *National Code 2007*.

Where my tuition fee will be paid by a funding body, I agree to USC communicating with the third party regarding my enrolment at USC.

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 <https://internationaleducation.gov.au> This agreement, and the availability of complaints and appeals processes, does not remove my right to take action under Australia's consumer protection laws.

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
111 39 Stockholm, Sweden

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

I understand and accept the conditions set out in the declaration above.

Name: <input type="text"/>	Date: <input type="text"/>
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