STUDY ABROAD APPLICATION FORM



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

							apprice					
1.0 PERSONAL DETAILS												
Have you been previously enrolle	ed at the University of	of the Sunshi	ne Coast? 🗌	No [] Yes—Stud	dent ID numb	ber:					
Title: Mr Mrs Miss]Ms □Dr □Other	· I	Date of birth:	Day	N	lonth	Y	'ear	Sex:	Mal	e 🗌	Female
	(as showr	on passport)			(eg 21 / Ja	anuary / 1979)						
Family name:				Given	names:							
Country of birth:				Citize	nship:							
Passport number: Date of issue: DD /			MM / YYYY	Country of issue:								
What visa are you applying for? Student visa Extension to Student visa-subclass: Other:												
Do you require OSHC*?: Yes	Do you require OSHC*?: Yes No Type of cover: Single cover Dual family [#] Multi family [†] I will arrange my own OSHC co							C cover				
If purchased through USC, OSHC Essentials cor * Overseas Student Health Cover. # Either one † More than one dependant which can only in	adult spouse or recognised de	-facto partner or o	ne or more dependan					sa holder.				
Address / contact details												
Number and street:												
Town/City:			State:			Coun	Country:					
Postcode/Zip:			Email:			@	@					
Telephone: Country Area Local number Mobile:						Fax:	Fax: Country Area Local number					
Permanent Address in home	country (if differer	nt from abov	ve)									
Number and street:			Town/City:				State:					
Country:			Postcode/Zip:			Telep	Telephone: Country Area Local number					r
2.0 ENGLISH LANGUAGE P	ROFICIENCY											
Yes -English is my first lang	guage (Evidence of fire	st language ma	ay be requested)	🗌 N	o –my first	language is:						
If English is not your first langu	age, please fill in th	e following a	nd attach docu	imenta	ry evidence.							
English proficiency test taken (eg Cambridge, IELTS, TOEFL, DAAD):				Score:				Date: DD / MM / YYY			YYY	
I intend to sit for an English proficiency test:								Test date: DD / MM / Y				/ YYYY
 I applied for/am currently ta I have successfully complete two years full-time second 	ed a course delivered	d entirely in E	English, within				-time ot	her pos	st-seco	ndary s	tudy	
3.0 COURSES PREFERRED	Visit the USC we	bsite at www	.usc.edu.au/st	udyabro	oad for cou	ırse list (cou	rse offe	rings a	re subj	ect to	chan	ge).
I want to study for: One	two semesters	Commenci	ng: 🗌 Semest	er 1 (Fe	eb–June)	Year	Ser	mester	2 (July-	-Nov)		Year
Course Code (eg COR109) Course	e title (eg Communicatio	on and Thought)			Semester o	f offer (1 or 2)	Home	e Institu	ution ap	oproval	(if rec	quired)

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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			
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.

5.0 SUPPORT SERVICES

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

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

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 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

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

Name:

Date: