

CENTRAL QUEENSLAND UNIVERSITY

APPLICANT DECLARATION

I declare the information supplied by me on this form is true and correct in every particular. I authorise CQUniversity to obtain from other educational institutions and relevant authorities details of my enrolment, academic record, examination results and bond status. I am aware that information relating to my application to undertake study with CQUniversity may be provided to DIBP (Department of Immigration and Border Protection).

Applicant Name: _____
Applicant Signature: _____
Place: _____
Date: _____ (DD/MM/YYYY)

CERTIFICATION

All applicants must sign below.

I certify that the information I have provided on this application is true and correct. I understand that failure to disclose correct information may result in the cancellation of my application or admission.

Important Reminder: Only complete applications will be reviewed.

Applicant Signature: _____
Place: _____
Date: _____ (DD/MM/YYYY)

Authorization for IEC to process this application

I hereby permit International Education Centre (IEC Online GmbH) to submit the information which I have provided on the application form of CQUniversity via an electronic online application form created and maintained by the university.

Applicant Signature: _____
Place: _____
Date: _____ (DD/MM/YYYY)