

INTERNATIONAL APPLICATION FOR ADMISSION

Complete ALL sections relevant to your application using
BLOCK LETTERS only or

- FULL DEGREE** Sections A, B, E, F, G, H, I, J, K
- ENGLISH LANGUAGE PROGRAM** Complete sections A, D, E, G, H, I, J, K
- STUDY ABROAD** Complete sections A, C, E, F, G, H, I, J, K
- EDUCATION COLLABORATION** Complete sections A, B, E, F, J, K

Institution Name:

EDUCATION AGENT (including branch):

iec online GmbH
 Marienstrasse 19/20, D-10117 Berlin
 Tel. +49 (0)30-20458687
 www.ieconline.de

A. PERSONAL DETAILS

Have you previously enrolled at Southern Cross University? Yes No If 'Yes' supply student number _____

| | | |
|--------------------------|----------------------------------------------|-----------------------------------------------------------|
| Title (optional) | Family Name (as it appears on your passport) | Given Name/s |
| Date of Birth (dd/mm/yy) | Gender (M/F/other) | Formal Name (to be displayed on your academic transcript) |

PASSPORT DETAILS

| | |
|-----------------|------------------|
| Citizenship | Country of Birth |
| Passport Number | |

Is English your first language? Yes No If 'No' what is your first language? _____

Student's address in home country

Student's address if already in Australia

| | |
|-------------------------------|-------------------|
| Number and Street | Number and Street |
| Suburb/Town | Suburb/Town |
| State, Zip/Postcode & Country | State, Postcode |
| Phone (include country code) | Phone |
| Email | Email |

Emergency Contact Details

| | | |
|--------------|--------------|----------------|
| Full Name | Relationship | |
| Phone (home) | Phone (work) | Phone (mobile) |

Do you have a disability, impairment or long-term medical condition that may affect your studies? Yes No If 'Yes' please indicate area(s) of impairment Hearing Medical Vision Mobility Learning Other (please specify) _____

B. PROGRAM OF STUDY

| Course preferences | Major | Location | Duration | Start date |
|--------------------|-------|----------|----------|------------|
| | | | | |
| | | | | |

ADVANCED STANDING Are you seeking advanced standing for previous study? Yes No

If 'Yes' complete an **Advanced Standing Application Form** (www.scu.edu.au/advancedstanding), with supporting documentation including a certified copy of the transcript, comprehensive syllabus details for each relevant unit (descriptions, learning hours, assessment methods and explanation of weighting of each unit).

C. STUDY ABROAD (Non award study for one or two sessions)

| | | | |
|------------|-----------|--------|--------------|
| Start date | Duration | | |
| Unit name | Unit code | Campus | Session/year |
| | | | |
| | | | |
| | | | |

D. ENGLISH LANGUAGE PROGRAM ONLY

| Course | Location | Duration | Session/year |
|--------|----------|----------|--------------|
| | | | |

Do you require Homestay accommodation? Yes No **A 10-week Homestay placement is recommended for EAP programs**
 If 'Yes', attach the Homestay application, download at www.scu.edu.au/international/apply
 If 'No', I understand that finding alternative accommodation is my responsibility.

E. ENGLISH LANGUAGE PROFICIENCY

Was English the language of instruction in previous secondary or tertiary studies? Yes No

If 'Yes' please indicate the studies completed in English and their combined duration. Attach your results as supporting evidence.

| Studies | Duration |
|---------|----------|
| | |

If 'No', you will be required to complete an English language proficiency test. Please indicate date, test undertaken and results below.

| Date taken* (dd/mm/yy) | English test name | Result | Test report form number |
|------------------------|-------------------|--------|-------------------------|
| | | | |

*English language test must have been undertaken within the last two years.

F. ACADEMIC QUALIFICATIONS

Provide details and official documentation of **ALL** your qualifications; include secondary and post-secondary. All official certified transcripts must be submitted.

| Name of Qualification | School/Institution | Country | Length of program | Completed (mm,yy) |
|--------------------------------|---------------------------|-----------|-------------------|-------------------|
| e.g. Higher School Certificate | Lismore High School | Australia | 2 years | 11/12 |
| e.g. Bachelor of Business | Southern Cross University | Australia | 3 years | 02/17 |
| | | | | |
| | | | | |

Are you CURRENTLY studying? Yes No If 'Yes' please provide details.

| Qualification/Award | Institution | Country | Date (mm,yy) | Results (expected) |
|---------------------|-------------|---------|--------------|--------------------|
| | | | | |
| | | | | |

Have you been excluded or are you liable for exclusion on academic or other grounds, from any Australian tertiary institution or course following a previous enrolment? Yes No If 'Yes', provide details on additional page.

RELEVANT EMPLOYMENT HISTORY

If you would like to include work experience as part of your application, provide a current resume and work references.

| From | To | Full-time/ Part-time | Employer | Position | Duties |
|-------|-------|-------------------------|----------|----------|--------|
| mm/yy | mm/yy | | | | |
| mm/yy | mm/yy | | | | |

G. FINANCE

I confirm I have access to sufficient funds for the duration of my studies and I understand that I may be required to demonstrate funds to cover expenses for the first year in Australia. Refer to www.homeaffairs.gov.au for more information.

Scholarship details (if applicable) Will you be receiving a scholarship? Yes No

| |
|---------------------|
| Name of scholarship |
|---------------------|

You can choose to pay more than 50 per cent of your tuition fees before you start your course.

Will you be paying more than 50 per cent of your course fees before you start? Yes No

H. VISA To be completed by international students wanting to undertake study in Australia who will be applying for a student visa

1. Do you hold a current Australian visa? Yes No *If 'Yes' attach a copy of visa and passport.*
2. Have you or any dependent ever been refused entry to Australia or had a visa cancelled? Yes No
If 'Yes', please provide details on additional page.

I. OVERSEAS STUDENT HEALTH COVER (OSHC) You will need to provide proof of health cover at acceptance stage

Would you like the University to arrange your OSHC? Yes No

If yes, what type of OSHC will you be requiring (tick the relevant category) Single Couple Family

If no, please provide your OSHC details: OSHC Provider Name: _____

Membership number: _____ Cover type _____ Expiry date (dd/mm/yy) _____

J. DECLARATION, TERMS AND CONDITIONS AND SIGNATURE

The personal information you provide on this form is protected by the Commonwealth Privacy Act 1998, New South Wales Privacy and Personal Information Protection Act 1998 and the health information is protected by the Health Records and Information Privacy Act 2002. Details regarding the operation of the Acts are contained in Southern Cross University's Privacy Management Plan and may be viewed at: www.scu.edu.au/privacy

I also understand that:

- Southern Cross University communicates with me via electronic means.
- The information I have provided to the University may be made available to Commonwealth and State agencies pursuant to obligations under the Education Services for Overseas Students (ESOS) Act 2000 and the National Code of Practice for Registration Authorities and Providers of Education and Training to Overseas Students.
- The University is requesting this information so we can process your application for admission. When storing information electronically, the University may disclose your information by virtue of its cloud computing arrangements with cloud servers located in Hong Kong, Singapore and Ireland. The University is reasonably satisfied these countries have similar privacy protection as afforded under Australian law. Other than specified in this form, the University will not disclose your information to others unless required by law e.g. emergency or law enforcement purposes.
- Providing information to us is not required by law, however if you choose not to, we cannot process your application for admission.
- You can request access to your information at any time. To access or update your information refer to the University's Privacy Officer: privacy@scu.edu.au
- I declare I am a genuine temporary entrant and genuine student and intend to come to Australia with the primary purpose of academic study, and have the language, educational ability and financial capacity to undertake and successfully complete my academic plan.
- The University is unable to provide me with financial assistance if I experience financial difficulties during the course of my studies.
- By nominating an agent, as listed in the "contact address for correspondence", to represent me in my application to the University, I agree to the release of all information relating to my application and subsequent enrolment at the University to my nominated agent, until such time as this nomination is revoked by me in writing.
- If my application is part of a package arrangement with a provider, I agree to release my application information to process my application for admission.
- If the payment for my course is made by a sponsor (a third party paying my tuition fees or nominated by me as my sponsor), I agree to the release of all information to my sponsor regarding my application and subsequent enrolment including my subject results, progress reports, and enrolment details.
- Giving false or misleading information is a serious offence under the Criminal Code of the Commonwealth Government of Australia.
- The information may be disclosed to third parties for the purpose of progressing my application.
- In the case of visa refusals an administrative charge of \$500 or five per cent is charged when you apply for a refund, to cover costs incurred in relation to processing your student application.
- If the University provides Confirmation of Enrolment, or enrolls a student on the basis of fraudulent, forged or deliberately misleading documentation being supplied by the applicant/student, the enrolment will be withdrawn and in the case of a visa refusal the university will retain a modest administration fee.

I have read and understand the description of the ESOS framework made available at: www.internationaleducation.gov.au

I declare that the information provided in this application and the documentation supporting it is true and complete.

Applicant's signature _____ Date (dd/mm/yy) ____ / ____ / ____

Signature of parent/legal custodian
if student is under 18 years of age _____ Date (dd/mm/yy) ____ / ____ / ____

K. APPLICATION CHECKLIST

All documents must be certified copies of originals. Translation of documents into English must be completed by an accredited translation authority or an SCU International approved representative.

- | | |
|---------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| <input type="checkbox"/> Completed International Application for Admission form | <input type="checkbox"/> Evidence of employment history (if required) |
| <input type="checkbox"/> Academic transcripts (with grading system) | <input type="checkbox"/> Any other supporting documents applicable to your application |
| <input type="checkbox"/> English language test results | <input type="checkbox"/> Copy of passport (include photo page and relevant visa page/s) |
| <input type="checkbox"/> Advanced Standing form and documentation (if required) | <input type="checkbox"/> Copy of Marriage Certificate (if applicable). |

SUBMIT YOUR APPLICATION WITH ATTACHMENTS

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