

Submit to:
 Student Administration
 University of the Sunshine Coast
 Maroochydore DC QLD 4558
 Australia
 APPL: SID:

CROSS-INSTITUTIONAL APPLICATION FORM

- For applicants to seeking undertake courses at University of the Sunshine Coast for credit / advanced standing towards a program at another commonwealth-funded tertiary institution.
- The following documentation must be included in order for this application to be considered:
 - a completed certified copy of your Statement of Academic Record from your home institution.
 - *Home Institution Approval* section (page 4 of this application).

PERSONAL DETAILS

NAME

Title (eg Mr, Mrs, Ms) Family Name / Surname Given Name/s

Previous Name/s (if applicable)

CITIZEN / RESIDENCE STATUS

1. You are an Australian citizen.
2. You are a New Zealand citizen
3. You are a permanent resident (excluding New Zealand citizens).
Country of Citizenship _____
4. You are the holder of a permanent humanitarian visa.
5. You have a temporary entry permit (eg student visa or temporary resident visa) or you are a diplomat or a dependent of a diplomat (except New Zealand) and will reside in Australia during semester.

Were you born in Australia? Yes No

What is your Country of Birth? _____

What year did you arrive in Australia? _____

What is your first language? _____

What language do you speak at home? _____

DATE OF BIRTH EMAIL (if applicable)

Day Month Year

MAILING ADDRESS

Number and Street (or PO Box) Suburb or Town

State Postcode/Zipcode Country (only if not Australia)

CONTACT DETAILS

Area Code Daytime Telephone Number

Other Telephone Number

USC COURSE(S) IN WHICH ENROLMENT IS SOUGHT

- Ensure that the course you wish to take is offered in the semester in which you plan to enrol. Courses details, including days, times and locations can be obtained from the semester timetable at: www.usc.edu.au/Students/Handbook/Timetables/
- Please indicate your preferred lecture, tutorial and/or laboratory/workshop class numbers for each course. You must provide more than one timetable option for each class in the event that your first preference is unavailable.

Semester and Year of Study: Semester _____ Year 200_____

Course Code	Course Title	Lecture Class Number	Tutorial Class Number	Laboratory/Workshop Class Number

ENTRY QUALIFICATIONS

PLEASE NOTE: Applications are approved on the basis of qualifications presented with your application and are subject to availability of places.

DOCUMENTARY EVIDENCE

Please send documentary evidence of your qualifications with this form specifically:

- An official certified statement of your academic record for tertiary studies undertaken to date. Photocopies of official statements / documentation should be certified by a Justice of the Peace or relevant certifying authority.
- If you are awaiting results please forward official results immediately once available.

Tertiary Level studies

Years undertaken (eg from 96 to 98)		Name of course / award	Institution	Program completed	
From	To	(eg Bachelor of Science)		Yes	No

HOME INSTITUTION APPROVAL (Applications will not be considered until approval from your home institution has been supplied)

Applicants for Cross-institutional study at University of the Sunshine Coast must ensure that their home institution completes this section.

a) CONFIRMATION OF STUDENT CONTRIBUTION RATE To be completed by the Fees Officer or equivalent

I confirm that this student is currently enrolled at our Commonwealth-funded University/Institution and is eligible to receive Commonwealth Support under the *Higher Education Support Act 2003*. The student is required to pay a student contribution at this institution at the following rate:

- Please tick**
- Pre-2008 Rate (Students commencing higher education before 01/01/08)
 - Pre-2009 Rate (Students commencing higher education before 01/01/09)
 - Post-2008 Rate (Students commencing higher education after 2008)

Signature Authorised Officer: _____

Date: _____

Name and Position: _____

Contact Phone Number: _____

University / Institute Stamp / Seal

b) APPROVAL OF COURSES (SUBJECTS)

To be completed by the Dean / Course Coordinator / Course Adviser or equivalent Authorised officer.

Approval is given for this student to undertake the following courses at University of the Sunshine Coast. Upon completion of these courses, such courses will be credited towards the student's program at the home tertiary institution.

Please list each approved course / subject below.

Course Code	Course Name	Year and Semester

Signature Authorised Officer: _____

Date: _____

Name and Position: _____

Contact Phone Number: _____

University / Institute Stamp / Seal

DECLARATION

I have read the University's statement on privacy and the purposes for which my personal information will be used (available at <http://www.usc.edu.au/privacyplan>). I agree to be bound by the statutes, policies, guidelines and rules of the University amended from time to time and agree to pay all fees and charges directly arising from my enrolment. I consent to receiving information electronically and agree to access the correspondence of my University email account on a regular basis and to maintain current mailing address details on USCCentral.

Student's Signature _____ Date _____

OFFICE USE ONLY

TO BE COMPLETED BY FACULTY

I have assessed this application and am satisfied that the applicant has sufficient background to undertake the course(s) indicated on this application form.

Comments _____ Comments _____

Signature _____ Signature _____
 Date _____ Date _____

TO BE COMPLETED BY STUDENT ADMINISTRATION – ENROLMENT

Application entered	Admit & BASAD	USCCentral Password created	Early offer letter / Offer package sent	Enrolment Processed	Action staff

Follow up required: _____