



## **Application for La Trobe University**

Study Abroad						
Level:	□ Undergraduate □ Postgraduate					
Intake:	□ S1/ March	□ S2/ July				
Duration of study:	□ 1 Semester	□ 2 Semester	□ Full aca	demic year		
Have you previously enrolled at La Trobe University?			□ Yes	□ No		
Personal Details						
Title:	□ Mr	□ Mrs	□ Other:			
Gender:	□ Female	□ Male	□ Indeter	minate/Intersex/Uns	specified	
Last Name:						
First Name:						
Middle Name:						
Date of Birth:	Day: Mo	onth: Year	:			
Will you be under 18 years of age when you commence your study at La Trobe University? ☐ Yes ☐ No						
Do you have a disability, in	npairment or long	term medical co	ndition tha	at may affect your stu	udies? □ Yes	□ No
If yes, please specify (e.g. Mobility):						

## Mobile Phone: Phone: Address: City: State: Country: Zipcode: If different postal address Address: City: State: Country: Zipcode: **Passport and Visa Information** Country of Birth: Citizenship: Do you currently hold a Passport? ☐ Yes ☐ No If yes, please provide your passport number? Are you currently living in Australia? ☐ Yes ☐ No If yes, name your visa type: \_\_\_\_\_ Current Visa Number as shown on your Visa Label: \_\_\_\_\_ Visa Expiry Date: Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_ Visa Subclass Number: \_\_\_\_\_

**Contact Details** 

# **Course Selection** Area of Study: Course Load? □ 3 Credits □ 4 Credits Your preferred courses for your abroad study at La Trobe (e. g. AIA106 - Populate Or Perish: Australia's People; T1; Burwood) Code Unit name Credits **English Language Proficiency** Is English your first language? □ Yes ⊓ No What is your first language? Have you undertaken an English language test? ☐ Yes ☐ No Test Type: Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_ Date of Test: Location of Test: Test Reference Number: Are you currently enrolled or intend to enrol in an English Language Course in Australia or at La Trobe Col-

□ Yes

 $\square$  No

lege Australia?

## **Academic Qualifications**

Have you commenced, completed or are currently dation Studies?		n a Senior S □ No	Secondary Sch	ool program or F	oun-
Have you commenced, completed or are you curre	-	lled in post-	-secondary/ter	rtiary studies?	
If yes:	103	L 110			
Study Level (e.g. Bachelor of Music):					
Name of Institution:					
Have you completed this study: Day:	Moi	nth:	_Year:		
Language of instruction:					
Other Qualification					
Study Level (e.g. Bachelor of Music):					
Name of Institution:					
Have you completed this study: Day:	Moi	nth:	Year:		
Language of instruction:					
Do you have a gap in education longer than 6 mon	ths?	□ Yes □	□ No		
If yes, please explain the purpose of the gap:					
Have you ever been excluded from an academic in	stitution:	□ Yes □	□ No		
If yes, please explain the purpose:					

## **Overseas Student Health Cover**

It is a requirement of the Australian Government that you maintain Overseas Student Health Cover (OSHC) for the duration of your student visa. (See La Trobe Health Insurance Information for details.) Please choose one name option (e. g. Please provide me with a quote of a OSHC / I'm organizing my own OSHC):

### **Additional Questions**

I understand the costs associated with studying in Australia (including costs of tuition, living expenses,				
OSHC, return airfares etc.) See Guide to Living Costs for more information:	□ Yes	□ No		
How will you be funding your study and living costs (e. g. self-funded / family-funded):				

#### **Declaration**

#### I declare that:

- I am not a permanent resident or citizen of Australia, nor a citizen of New Zealand.
- The information supplied in this application and all supporting documentation is correct and complete, all documents are genuine, and any supplementary application documents (personal statement, folio or additional requirements) are my own work.
- I am seeking admission to the University as a genuine international student, having carefully chosen the University program to apply for which matches my future career goals.
- I have genuine access to total funds required to cover all tuition fees, travel costs, Overseas
  Student Health Cover and living costs for myself and my dependents for my stay in Australia
  and, if I have any school-aged children or dependants accompanying me to Australia, I understand they must attend school and I will be required to pay a full fee if they are enrolled either
  in a government or non-government school.
- I have read and understood the University's Privacy Policy.

#### I acknowledge that:

- The University reserves the right at any stage to vary or reverse any decision regarding admission or enrolment which has been made on the basis of incorrect, fraudulent or incomplete information. Failure to disclose my full academic record may result in the University revoking an offer or terminating my studies at any stage.
- The University places restrictions on course and institution transfers and that I may not be permitted to change my course or institution without permission.

#### I authorise the University to:

- Seek verification of my academic and professional qualifications, English Proficiency test scores and work experience.
- Disclose information relevant to my application and enrolment to the University's preferred OSHC provider and other third parties for the purposes of arranging my OSHC, progressing my application and enrolment, and administering my course. I also authorise the University to access the Department of Home Affairs (DHA) to obtain information on my visa status (for students studying in Australia only).

### I understand and accept that:

- The University reserves the right to vary courses, subjects, the mode of delivery, teaching location, assessment and admission requirements at any time at its discretion.
- I authorise the University to use and disclose personal information under the conditions relating to the Refund Policy.

- The University reserves the right to inform other tertiary institutions and regulatory agencies
  if any of the material presented to support my application is found to be false. If sponsored by
  a government body or private institution, I give the University permission to provide my sponsor with information about my application, enrolment and academic progress.
- Fees listed are an estimate only, based on the subjects in which I enrol, and will vary depending on the subject and the actual subject enrolment load. I agree to pay all fees for which I am liable. I acknowledge that the tuition fee is exclusive of the cost of text books, health insurance or living expenses such as food, accommodation, transport and medical costs. Details on any additional costs for the selected course can be found within course descriptions on the University's website.
- Tuition and other fees are subject to change each year. The University reserves the right to vary fees on an annual basis. In the event of a fee increase, the University will issue me with a Statement of Account after enrolment for my Actual Tuition Fees, which will indicate the specified due date for payment of each subject. If I am enrolled in a greater than standard 60 credit point load in any semester, I may will be required to pay additional fees in that semester.
- This application and all supporting documentation become the property of the University and are not returnable.
- This application does not remove my right to take further action under Australian Laws.
- If I am not successful in gaining direct entry into the course I have applied for, the University may refer my application to the University's preferred pathway providers for an alternative course that may lead to my chosen University degree (if applicable).
- The information I have provided on this form and during enrolment may be made available to the Australian Government, state agencies and other designated authorities under the ESOS Act 2000 (Cth) and the ESOS National Code 2018. Information about me can be disclosed without my consent where authorised or required by law.
- The University, as an education provider, is required to provide information about my enrolment and my contact details in Australia to the Department of Home Affairs (DHA) upon request.
- The University may contact me by mail, email or telephone to provide further information on services, pathway options and other courses offered by the University.
- The University will communicate with me via the email I have provided unless I inform the University to do so otherwise.

Ш	that checking this box is the equ	erstood and agree to the above Declaration and acknowledge uivalent of a signature.
	Date	Signature
	, ,	t to submit the information which I have provided on this form ectronic online application form created and maintained by La
	Date	Signature