

# SUPPLEMENTARY INFORMATION FORM

INTERNATIONAL STUDENTS ONLY

## WHICH OF THE FOLLOWING COURSES ARE YOU APPLYING FOR (TICK ONE ONLY):

- GRADUATE DIPLOMA IN SECONDARY EDUCATION [HGES]  
 GRADUATE DIPLOMA IN PRIMARY TEACHING [AGTP]  
 GRADUATE DIPLOMA IN EARLY CHILDHOOD TEACHING [AGTE]  
 MASTER OF TEACHING [AMTE] (SECONDARY STREAM)  
 MASTER OF TEACHING [AMTE] (PRIMARY STREAM)  
 MASTER OF TEACHING [AMTE] (EARLY CHILDHOOD STREAM)

**VU STUDENT ID NUMBER** (IF APPLICABLE):

## PERSONAL DETAILS

DATE OF BIRTH:   /   TITLE: MR  MISS  MS  MRS

FAMILY NAME (AS STATED IN PASSPORT): \_\_\_\_\_

GIVEN NAME(S): \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ MOBILE / CELL: \_\_\_\_\_

EMAIL: \_\_\_\_\_

## ADDRESS

NUMBER AND STREET: \_\_\_\_\_

SUBURB / TOWN: \_\_\_\_\_ STATE / PROVINCE: \_\_\_\_\_

COUNTRY: \_\_\_\_\_ POSTCODE / ZIP CODE: \_\_\_\_\_

## EDUCATION HISTORY

Please indicate the highest level of secondary school undertaken and all post-secondary qualifications that you have completed or attempted (including: tertiary studies, trade certificates, short courses, etc), and attach a certified copy of your final results or results to date.

YEAR OF STUDY	QUALIFICATION	INSTITUTION	MAJOR AREA OF STUDY	COMPLETED Y/N





