

STUDENT EXCHANGE APPLICATION FORM



VICTORIA UNIVERSITY

A NEW SCHOOL OF THOUGHT

APPLICATION FOR INCOMING STUDENT EXCHANGE FROM VICTORIA UNIVERSITY PARTNER INSTITUTIONS

- All documents must be certified by a recognised authority (i.e. school, university, Victoria University representative).
- This form should not be used by permanent residents or citizens of Australia or citizens of New Zealand.

VU STUDENT ID (if applicable):

PERSONAL DETAILS

Mr/Mrs/Miss/Ms Family Name (as stated in passport):

Given Name (as stated in passport):

Gender (M/F):

Date of birth (day/month/year):

Country of Birth:

Citizenship (as stated in passport):

Passport No.:

Please attach a photocopy of the photo ID page from your passport.

ADDRESS FOR CORRESPONDENCE:

Number and Street:

Suburb or Town:

State/Province:

Postcode/Zip code:

Country:

Ph:

Fax:

Email:

PERMANENT HOME ADDRESS (IF DIFFERENT FROM ABOVE):

Number and Street:

Suburb or Town:

State/Province:

Postcode/Zip code:

Country:

Ph:

Fax:

Email:

DURATION OF EXCHANGE PROGRAM: One Semester One Year Intended commencement date: Semester 1 (Feb - June) 2 (July - Dec)

SUBJECT PREFERENCE

List your preferred subjects of study, campus and commencing semester. Subject codes and titles must be written in full. Visit WWW.VU.EDU.AU/HANDBOOKS for a listing of subject names and codes. Please check the prerequisites of any subject you nominate. Select four subjects and two alternate subjects.

	Subject Name	Subject Code	Campus Code	Commencing Semester and Year
Example: 1st Preference	History 1a-Australian History: 19th Century	AAH1007	FP	1-2007
1st Preference				
2nd Preference				
3rd Preference				
4th Preference				
5th Preference				
6th Preference				

VISA STATUS

Are you currently in Australia? Yes No

If yes, please indicate: Visa type (i.e. student, tourist, etc.):

Visa No.:

Expiry date (day/month/year):

CURRENT STUDIES IN YOUR HOME COUNTRY

Please provide details of your current study.

Institution:

Country:

Degree Program:

Major field of study:

ENGLISH LANGUAGE PROFICIENCY

You must provide documentary evidence of your English language proficiency to meet Victoria University's English language requirements if English is not your current language of tuition.

Please tick appropriate boxes.

1. English is my first language Yes No
2. I have sat an IELTS test Yes No (attach results)
3. I have sat a TOEFL test Yes No (attach results)
4. Other documentation (if applicable) Yes No

I am completing/have completed an ELICOS course.

Please indicate name of institution: _____

Date (from-to): _____

Would you like to study English at Victoria University prior to commencing your academic course? Please tick appropriate box. Yes No

DISABILITIES

Do you have a disability for which additional assistance is required? (Please tick appropriate box) Yes No

If yes, please attach a separate sheet outlining this disability.

ENDORSEMENT OF HOME INSTITUTION

To be completed by your Exchange or International Advisor

Exchange/Internal advisor: (Print name) _____

Date: _____

Signature _____

DECLARATION

I, _____

(Applicant's full name in BLOCK LETTERS and if the student is under 18 years of age parent/guardian's full name)

- declare that the information and supporting documentation provided is true and complete. I acknowledge that Victoria University reserves the right at any stage to vary or reverse any decision regarding admission or enrolment made on the basis of incorrect or incomplete information;
- understand and accept that I must abide by all terms and conditions of my visa;
- am able to make appropriate arrangements to fund my studies;
- am fully responsible for my educational and living expenses (excluding tuition fees) while studying at Victoria University;
- agree to advise the University within seven days if any subsequent changes to my residential address;
- authorise Victoria University to obtain further relevant documentation if necessary;
- authorise the University to provide the Commonwealth, State agencies and approved Victoria University's representatives information about my address and details of enrolment;
- understand that any school-aged dependants accompanying me to Australia will be required to pay full fees if they are enrolled in a school in Australia; and
- have read, understood and accept the above conditions.

Signature of applicant: **X** _____

Date: _____

Signature of parent/guardian (for student under 18 years of age): **X** _____

Date: _____

APPLICATION CHECKLIST:

IMPORTANT: INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED

Have you:

- Completed all sections of this application?
- Signed and dated the declaration?
- Enclosed certified copies of academic transcripts and award certificates and, where appropriate, certified English translation of academic records?
- Where appropriate, enclosed certified copies of English language test scores and other supporting documentation as requested?
- Provided a copy of your passport photo ID page?

FORWARD YOUR APPLICATION TO YOUR HOME INSTITUTION'S INTERNATIONAL EDUCATION ADDRESS

Phone +61 3 9919 1296 / 1319

Fax +61 3 9919 1367

Email educationabroad@vu.edu.au

www.vu.edu.au/current-students/student-exchange-program

CRICOS Provider Code: 00124K