APPLY FOR RESEARCH (DOMESTIC STUDENTS ONLY)



You can use this form to apply for a research degree.

All applicants should note that you must fulfil the minimum entrance requirements for this application.

Please refer to vu.edu.au/research/graduate-research-studies/apply-for-a-research-degree for more information. When you have completed this form, please email the form and all accompanying documentation to Apply.Research@vu.edu.au. Only applications submitted to this email will be accepted. Incomplete applications will not be processed.

PLEASE WRITE IN **BLOCK LETTERS** USING A BLACK OR BLUE PEN.

SECTION A: PERSONAL INFO	JKMATION			
TITLE:				
FAMILY NAME:				
GIVEN NAME:				
DATE OF BIRTH:			GENDER: MALE F	EMALE
POSTAL ADDRESS				
STREET NUMBER AND NAME:				
SUBURB:		STATE:	POSTCODE:	
PHONE:	EMAIL:			
IF YOU HAVE PROVIDED A PO BOX ADI	DRESS AS YOUR POSTAL ADDRESS, PLEASE ALSO	PROVIDE A RESIDENTIAL ADDRES	SS IN THE SPACE BELOW.	
IS YOUR POSTAL ADDRESS DIFFE	RENT FROM YOUR HOME ADDRESS OR	SEMESTER ADDRESS?	YES NO	
IF YES , PLEASE WRITE YOUR ADDRESS B	ELOW AND INDICATE WHETHER	HOME SEMEST	ER ADDRESS	
ADDRESS:				

RESEARCH ADMISSION FORM (A125)

SECTION B: COURSE DETAILS

I AM USING THIS FORM TO APPLY FOR A:						
MASTER OF APPLIED RESEARCH	MASTER OF APPLIED RESEARCH MASTER OF RESEARCH MASTER OF RESEARCH PRACTICE					
DOCTOR OF PHILOSOPHY	DOCTOR OF PHILOSOPHY (INTEGRATED)					
HAVE YOU PREVIOUSLY HELD A RESEARCH T	RAINING PROGRAM PLACE AT ANOTHER INSTITUTION?	YES NO				
If YES , please indicate:						
INSTITUTION:						
DEGREE TYPE:		YEARS OF STUDY:				
If YES , please attach an application for advanced candid	ature and confirm enrolment dates at prevoius institution below:					
INTO WHICH INSTITUTE WILL YOU BE ENROI	LLING?					
INSTITUTE FOR SUSTAINABLE INDUSTRIES LIVABL	E CITIES INSTITUTE FOR HEALTH AND SPORT					
OTHER:						
NAME OF POTENTIAL RESEARCH SUPERVISOR: Please include email evidence that contact has been made	le with potential supervisor. If this evidence is not provided, your applic	ation will not be considered.				
AREAS OF RESEARCH PRORITY AND FIELD OF RESEARCH						
You may nominate one code. If you don't provide this in	formation, your application will not be considered (vu.edu.au/study-at-	vu/how-to-apply/graduate-research-applicants).				
WHAT IS YOUR PREFERRED MODE OF STUDY	/?					
PART TIME FULL TIME						
NUMBER OF HOURS PER WEEK YOU ARE AVAILABLE FOR	STUDIES:					
HAVE YOU PREVIOUSLY APPLIED FOR A COU	IRSE OR BEEN ENROLLED AT VICTORIA UNIVERSITY	YES NO				
IF YES , COURSE NAME:		STUDENT ID:				

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SECTION C: PERSON STATISTICS – ALL APPLICANTS MUST COMPLETE THIS SECTION

	1.	ARE YOU OF ABORIGINAL OR		6.	IN WHAT COUNTRY WERE YOU BORN?		
2		TORRES STRAIT ISLANDER ORIGIN? MEITHED ADODICINAL MOD TORDES STRAIT ISLANDED			AUSTRALIA		
3	H	NEITHER ABORIGINAL NOR TORRES STRAIT ISLANDER YES, ABORIGINAL			COUNTRY:		
	H			YEAR	OF ARRIVAL:		
5	H	YES, TORRES STRAIT ISLANDER YES, BOTH ABORIGINAL AND TORRES STRAIT ISLANDER		7.	DO YOU SPEAK A LANGUAGE OTHER THAN		
,			0001		ENGLISH AT HOME?		
	2.	WHAT IS YOUR CITIZENSHIP/RESIDENCE STATUS? If your current citizenship/residency status is not listed below, DO NOT complete this form.	0001		YES		
		Please contact Victoria University International on +613 9919 1164		LANG	UAGE:		
		or email international@vu.edu.au		8.	IF YOU HAVE COMPLETED YEAR 12, PLEASE INDICATE		
1	H	AUSTRALIAN CITIZEN			YOUR PERMANENT HOME RESIDENCE DURING THAT YEAR.		
2	H	NEW ZEALAND CITIZEN LIVING IN AUSTRALIA		POST	STCODE:		
3	Ш	PERMANENT RESIDENT (OTHER THAN HUMANITARIAN) (COMPLETE Q3)		SUBU	RB / TOWN:		
		DATE GRANTED: EXPIRY DATE:		9.	PLEASE INDICATE YOUR PARENTS/GUARDIANS GENDER		
6		YES, BOTH ABORIGINAL AND TORRES STRAIT ISLANDER		•	AND HIGHEST LEVEL OF EDUCATION.		
7		DATE GRANTED: EXPIRY DATE: TEMPORARY VISA HOLDER (TAFE ONLY)		PARE	NT/GUARDIAN 1 MALE FEMALE		
	片	PERMANENT HUMANITARIAN VISA HOLDER	20/40		POSTGRADUATE QUALIFICATION		
8	Ш	DATE GRANTED: EXPIRY DATE:	21/41		BACHELOR DEGREE		
	3.	IF YOU HAVE PERMANENT RESIDENCE	22/42		OTHER POST SCHOOL QUALIFICATION		
	٠.	STATUS, WHICH STATEMENT BEST DESCRIBES	23/43		COMPLETED YEAR 12 OR EQUIVALENT		
,		YOUR CIRCUMSTANCE?	24/44		DID NOT COMPLETE YEAR 12 OR EQUIVALENT		
1		I AM RESIDING IN AUSTRALIA DURING THE SEMESTER Or Outside Australia as per the course requirement	25/45		COMPLETED YEAR 10 OR EQUIVALENT		
2		I AM RESIDING OUTSIDE AUSTRALIA FOR THE SEMESTER	26/46		DID NOT COMPLETE YEAR 10 OR EQUIVALENT		
3		ON ENROLMENT DAY I HAD PERMANENT RESIDENCY FOR	49/59		DON'T KNOW		
	_	MORE COURSE THAN 12 MONTHS	98		NOT APPLICABLE		
	4.	IN WHAT COUNTRY IS YOUR PERMANENT HOME ADDRESS?		10.	PLEASE INDICATE YOUR PARENTS/GUARDIANS GENDER AND HIGHEST LEVEL OF EDUCATION.		
		AUSTRALIA POSTCODE:		PAREN	NT/GUARDIAN 2 MALE FEMALE		
		OVERSEAS	20/40		POSTGRADUATE QUALIFICATION		
	COUN	ITRY:	21/41		BACHELOR DEGREE		
	5.	IN WHAT COUNTRY IS YOUR RESIDENCE	22/42		OTHER POST SCHOOL QUALIFICATION		
	_	DURING THE YEAR?	23/43		COMPLETED YEAR 12 OR EQUIVALENT		
		AUSTRALIA POSTCODE:	24/44		DID NOT COMPLETE YEAR 12 OR EQUIVALENT		
		OVERSEAS	25/45		COMPLETED YEAR 10 OR EQUIVALENT		
	COUN	itry:	26/46		DID NOT COMPLETE YEAR 10 OR EQUIVALENT		
			49/59		DON'T KNOW		
			98		NOT APPLICABLE		

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	11.	WHAT WAS YOUR HIGHEST EDUCATIONAL PARTICIPATION PRIOR TO THIS COURSE?				
02		A COMPLETE HIGHER EDUCATION POSTGRADUATE LEVEL COURSE				
03		A COMPLETE HIGHER EDUCATION BACHELOR LEVEL COURSE				
04		A COMPLETE HIGHER EDUCATION SUB-DEGREE LEVEL				
05		AN INCOMPLETE HIGHER EDUCATION COURSE				
07		A COMPLETE FINAL YEAR OF SECONDARY EDUCATION AT SCHOOL OR TAFE				
80		OTHER QUALIFICATION, COMPLETE OR INCOMPLETE				
09		NO PRIOR EDUCATIONAL ATTAINMENT				
10		A COMPLETE VET AWARD COURSE				
11		AN INCOMPLETE VET AWARD COURSE				
	YEAR	COMPLETED (OR LAST YEAR ATTEMPTED):				
	12.	WHAT IS THE HIGHEST LEVEL OF SECONDARY EDUCATION YOU HAVE ATTEMPTED OR COMPLETED? REFER SEC-ED AUST				
٧		YEAR 12/VCE (OR EQUIVALENT)				
Н		YEAR 12/HSC (OR EQUIVALENT)				
Y		YEAR 11				
Y	YEAR 10					
Y	YEAR 9					
Y		YEAR 8 OR LOWER				
-1		INTERNATIONAL BACCALAUREATE IB				
	DET/	AILS OF YOUR FINAL YEAR OF ATTENDANCE:				
	YEAR:					
	NAME OF SCHOOL:					
	STATE:					
		RE WAS YOUR PERMANENT HOME RESIDENCE DURING IR FINAL YEAR OF SECONDARY EDUCATION?				
	POSTCODE:					
	COUN	ITRY:				
	WAS	THE FINAL YEAR COMPLETED?				
		YES NO ATAR (OR EQUIV.):				

PLEASE ATTACH CERTIFIED COPIES OF YOUR RESULTS AND QUALIFICATIONS TO DATE.

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SECTION D: POST SECONDARY EDUCATION AND QUALIFICATIONS

Please list all academic qualifications, with the most recent qualifications first (e.g. Bachelor of Communications or Postgraduate Diploma of Accounting). If your qualifications are from a country other than Australia, please attach an official 'Statement of Equivalence' available from the Overseas Qualifications Unit (Victoria) details available from liveinmelbourne.vic.gov.au/work/overseas-qualification-unit/apply-for-assessment? or telephone 1300 492 606.

Your application will not be considered until all certified documentation is received.

FULL NAME OF QUALIFICATION	MAJOR AREA OF STUDY	FULL NAME OF INSTITUTION	YEAR OF COMPLETION	STATE/COUNTRY		
PREVIOUS THESES LEASE STATE THE TITLE OF ANY PREVIOUS T	THESES COMPLETED (E.G. HONOURS OR N	NASTERS BY COURSEWORK WITH A MINOR TH	ESIS OR BY RESEARCH).		
LEASE ADVISE OF ANY RESEARCH AND/OR EMPLOYMENT ACTIVITIES THAT ARE RELEVANT TO THIS APPLICATION (E.G. CERTIFICATES OF MEMBERSHIP OF PROFESSIONAL BODIES). **LEASE ATTACH YOUR CV AND TWO WRITTEN ACADEMIC REFERENCES.**						
RESEARCH PROGRAM WHAT IS THE PROVISIONAL TITLE OF YOUR THESIS? vu.edu.au/research/graduate-research- studies/apply-for-a-research-degree						
RESEARCH SUPPORT PLEASE INDICATE HERE IF YOU REQUIRE ANY SPECIAL SUPPORT FOR YOUR RESEARCH DEGREE: vu.edu.au/research/graduate-research- studies/apply-for-a-research-degree						

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SECTION E: DECLARATION

BY SUBMITTING THIS APPLICATION:

- 1. I declare that the information given in this application is correct and complete.
- 2. I consent to the collection, use and disclosure of my personal information for the purpose of considering my application and where my application is successful, to enable me to enrol in a course of study, and enable the University to deliver the course and related services to me. I understand that any information collected in connection with this application will be treated in accordance with the University's

Privacy Policy and is necessary to enable the University to:

- a) Communicate with me about my course, events, activities, products, services and opportunities available to students of the University;
- b) Carry out administrative matters;
- c) Place my name on the student electoral roll;
- d) Maintain my academic record;
- e) Facilitate the University's internal planning and the provision of programs for the health and welfare of students;
- f) Foster alumni relations; and
- g) Fulfil any requirements regarding State and Commonwealth government reporting and statistical obligations, including to the Department of Education, Employment and Workplace Relations (DEEWR) for use in connection with the Higher Education Information Management System.
- 3. I authorise the University to obtain official records from any educational authority holding such records on me, and understand that QualSearch may be engaged to access this academic information. I understand that Victoria University is not responsible if any educational body does not supply these records, and that the results of the search will be made available to me on request. An audit of this authority mayalso be undertaken.
- 4. I further declare that I have read and understand the regulations for research degrees. I have had discussions with the appropriate staff of the College/Centre/Institute and I am satisfied that my research interests are compatible with those of the College/Centre/Institute, thatthe College/Centre/Institute has (or will make the necessary arrangements for) the required facilities and equipment for me to undertakethe program and that I am satisfied with the appointment of the nominated supervisors.
- 5. I acknowledge that some courses may require me to comply with additional legal and external agency/organisation requirements.
- 6. I further acknowledge that the University:
 - a) May discontinue my offer or cancel my enrolment if the information I provide in this application is incomplete or incorrect; and
 - b) Is under no obligation to consider late or incomplete applications.

ADDITION CHECKLIST - DIEASE CHECK THAT VOIL HAVE COMDITTED ALL SECTIONS

SIGNATURE OF APPLICANT:	DATE:
IF YOU FAIL TO COMPLETE ALL SECTIONS AND/OR FAIL TO SUBMIT THE ABOVE MENTION	ONED DOCUMENTATION, YOUR APPLICATION WILL NOT BE CONSIDERED.
ATTACHED CV INCLUDING 2 WRITTEN ACADEMIC REFEREES	
200 WORD PERSONAL STATEMENT ABOUT WHY YOU WANT TO UNDERTAKE THIS PROG	RAM.
ATTACHED CERTIFIED DEGREE TESTAMUR (QUALIFICATION CERTIFICATE)	
ATTACHED CERTIFIED DOCUMENTS (INCLUDING ACADEMIC TRANSCRIPTS AND/OR STATE	EMENT OF RESULTS)
COMPLETED SECTION D (SIGNED AND DATED FORM)	
ATTACHED 1-2 PAGE OUTLINE OF PROPOSED AREA OF RESEARCH	
COMPLETED SECTIONS A, B, C AND RESEARCH/THESIS QUESTIONS (WHERE RELEVANT)
AFFLICANT CHECKLIST - FLEASE CHECK THAT TOO HAVE COMFLETED ALL	ECHONS

CONTACT US

WEB: vu.edu.au/research/graduate-research-studies EMAIL: Apply.Research@vu.edu.au

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PRIVACY STATEMENT

Victoria University (VU) values your privacy and is committed to handling your personal information in accordance with the Privacy and Data Protection Act 2014 (Vic) and other applicable privacy legislation. The personal information collected on this form will be used primarily for the purposes of assessing and processing this application. VU may also use and disclose your personal information to verify the information provided by you, to comply with government and other reporting requirements and/or to carry out associated activities connected with this application. Your personal information may also be disclosed to Commonwealth and State agencies such as the Department of Education and Training and the Department of Home Affairs in accordance with VU's obligations under the Education Services for Overseas Students Act 2000 (Cth) (ESOS Act), the National Code of Practice for Providers of Education and Training to Overseas Students 2018 (National Code) and other applicable legislation. Your personal information will not otherwise be used or disclosed without your consent, unless permitted by law. By completing and submitting this application, you agree to VU collecting, using and disclosing your personal information as described above and in accordance with VU's Privacy Policy and Student Information Privacy Collection Statement (which provides further detail about the types of personal information VU may collect from you and how it is managed) available on the Privacy page on our website vu.edu.au/privacy

You have a right to access your personal information in held by VU. If you have any questions regarding privacy, please refer to the Privacy page on our website, our frequently asked questions at ASKVU or phone us on 9919 6100 or 1300 VIC UNI (or 1300 842 864).

PRIVACY INFORMATION:

We collect and protect your personal information in accordance with our Privacy Policy vu.edu.au/privacy

If you have any questions, you can access ASKVU, speak to us via live chat or call us on +61 3 9919 6100. Our VUHQs are located at the following campuses:

City King St Albans Footscray Park

Sunshine

City Flinders

Werribee

Footscray Nicholson