

Agent URN S19916

Representative's Stamp

A.E.Q. Siddique Managing Partner Student Connection International

International Application for Admission

Please print clearly in English and in BLOCK letters. Tick boxes where appropriate.

Note: Applications should be lodged four to six months prior to intake. However late applications may be given special consideration. If you are currently studying in Australia you should lodge

STUDENT DETAILS	your application at least four weeks prior to the intake.	
Title Given Names	Family Name	
Male Female Age	Date of Birth (day/month/year)	
Country of Birth	Nationality	
Are you a Citizen or Permanent Resident of Australia? Yes	No	
Home Address		
City	State/Province	
Country	Postcode	
Home Telephone	Mobile	
Email		
If you have a disability or ongoing medical condition which will require yo (e.g. hearing/visual impairment, mobility requirements) VISA DETAILS	u to seek special assistance from the University please provide details:	
Do you have a augment Avetrelian Vise?		
Do you have a current Australian Visa? Yes No	If yes, please provide a copy of your current visa	
Are you applying for a Student Visa? Yes No		
Visa Type	Visa Subclass Visa Expiry Date	
PASSPORT DETAILS		
Passport Number	Passport Expiry Date	
Please provide a copy of your current passport		
ENGLISH LANGUAGE		
All international students must demonstrate an acceptable level of English Please provide evidence of your English language proficiency by submit		
Academic IELTS (score)		
Overall Listening Reading	Writing Speaking	
Other (please specify)		
If you do not have test results, please indicate when you sat, or intend to sit the test		
Note: The Australian Government may require proof of English proficiency for visa applications. To find out go to www.immi.gov.au/students. For all other tests accepted by Admissions Office.		
PREVIOUS EDUCATION		
If you have previously been enrolled at Charles Sturt University, please p	rovide your student number	
Secondary Studies		
School	Country	
Highest level completed	Year completed	
Tertiary Studies		
Course		
Institution	Country	

Year completed

Please attach verified copies of all academic transcripts or reports (translated into English)

Course			
Institution		Country	
Duration		Year completed	
Please attach verified copies of all academic tran	scripts or reports (translated into English)		
If you have not yet completed your course, please indicate when you expect to qualify for your award			
COURSE SELECTION			
*	`	ational/fees-and-costs/international-student-fees) to determine the location of your course)	
CSU Campuses: Albury-Wodonga Bathurst Canberra Orange Parramatta Wagga Wagga			
CSU Study Centres: Melbourne Sydney First Preference			
Name of course			
Year	Intake (month)	Specialisation	
Second Preference			
Name of course			
Year	Intake (month)	Specialisation	
Do you intend to study a further cours		No No	
If so which course?			
ii 30 Willott Course:			
OSHC DETAILS (If applicable)			
Do you currently hold an OSHC policy? Yes No If yes, please provide the following details			
Name of OSHC provider			
OSHC Membership Number OSHC Expiry Date			
For your convinience, OSHC will be included automatically on your invoice unless your provide us with details of your alternative policy			
Please select type of cover you wish	to receive: Single	Dual Family Multi Family	
RELEVANT EMPLOYMENT EXPERIENCE (If required for your chosen course of study)			
Please attach a written statement and evidence of your employment history including: [1] Date of employment (from – to) [2] Job title [3] Main duties			
EXEMPTIONS/CREDIT			
Do you wish to apply for exemption/credit based on previous relevant studies? Yes No			
If yes, you must provide a certified copy in English of your transcript of results; a description of the grading system used; and a description of all subjects completed from the institution's official handbook/calendar for the appropriate year, or other appropriate evidence. For incomplete qualification we need the course structure (including number of credit points for whole degree and individual subjects if applicable). Applications for exemption/credit cannot be assessed without this information.			
DECLARATION AND SIGNATURE (This application must be signed; otherwise it will not be accepted)			
I wish to be considered for admission to the course(s) I have shown on this application form. I declare that to the best of my knowledge the information supplied within this application and the			
documentation supporting it is correct and comp from Charles Sturt University (CSU). I authorise C respect to my application. I also declare that I hav that CSU is required under Section 19 of the ESC	olete. I acknowledge that the provision of false or n CSU, where necessary, to obtain from any other ed- ve provided certified copies in English of the docul DS Act 2000, to inform the Department of Immigra- ademic performance. I also understand that under	misleading information may result in non-acceptance of this application or immediate exclusion ducational institution evidence of my academic record or seek other corroborating evidence with iments required for admission and will meet the conditions of my student visa. I also understanction and Border Protection (DIBP) about changes to my course enrolment and any breach of my the provisions of the ESOS Act 2000, CSU may release information provided in this application	
Signed		Date	
Signed (Parent, Legal Guardian*)		Date	
* if applicant is under the age of 18			
Send your CSU (Albury-Wodonga, Bathurst, Canberra, Orange, Parramatta, Wagga Wagga) applications to: CSU Admissions, Charles Sturt University Locked Bag 676, Wagga Wagga NSW 2678, Australia T: +61 2 6933 4334 F: +61 2 6933 2063 E: admissions@csu.edu.au www.csu.edu.au			
Send your CSU Study Centres (Melbo	urne and Sydney) applications via email	to: csuapplications@studygroup.com www.csustudycentres.edu.au	