

OFFICE USE ONLY	
Application Number	
Course code	Receipt number



CRICOS PROVIDER CODE 00099F

Print in the appropriate boxes.

INTERNATIONAL STUDENT POSTGRADUATE COURSEWORK APPLICATION FORM

UNIVERSITY OF TECHNOLOGY, SYDNEY

Please use a black pen and print clearly. Do NOT use this form if you are a citizen of Australia or New Zealand or a permanent resident of Australia.
A\$100.00 APPLICATION FEE

1. COURSE PREFERENCES

First choice	UTS course code	UTS course name	
Second choice	UTS course code	UTS course name	
When do you wish to begin your studies?	<input type="checkbox"/> Autumn Semester (February)	<input type="checkbox"/> Spring Semester (July)	Year

2. PERSONAL DETAILS (as shown on your passport)

Family name/surname			
Given names			
Date of birth	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female
Your address in your home country (Must <u>not</u> be an Australian address)			
			Postcode/Zip code
Tel	Country code : Area code : Number	Mobile	Country code : Area code : Number
Email (You must provide your email address)			
Your address for correspondence (or UTS representative company stamp)			

Institut Ranke-Heinemann Schnutenhausstrasse 44 45136 Essen Deutschland Tel.: 0049-201-252552 info@ranke-heinemann.de www.ranke-heinemann.de	Institut Ranke-Heinemann Friedrichstrasse 95 10117 Berlin Deutschland Tel.: 0049-30-209629593 berlin@ranke-heinemann.de www.ranke-heinemann.de	Institut Ranke-Heinemann Türkenstraße 70 80799 München Deutschland Tel.: 0049-89-80954030 muenchen@ranke-heinemann.de www.ranke-heinemann.de	Institut Ranke-Heinemann Silberburgstr. 112 70176 Stuttgart Deutschland Tel.: 0049-711-99338627 lentz@ranke-heinemann.de www.ranke-heinemann.de	Institut Ranke-Heinemann Grindelallee 91/ Martin-Luther-King-Platz 1 20146 Hamburg Deutschland Tel.: 0049-40-43091358 hamburg@ranke-heinemann.de www.ranke-heinemann.de	Institut Ranke-Heinemann Theresiengasse 32 1180 Wien Österreich Tel.: 0043-1-4060224 wien@ranke-heinemann.at www.ranke-heinemann.at
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3. VISA DETAILS

Nationality		Country of birth	
Country of permanent residency		Passport number	
Are you already in Australia?	<input type="checkbox"/> No <input type="checkbox"/> Yes	Visa category <input type="text"/>	Visa expiry date (day/month/year) <input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Year of entry into Australia <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
If you hold a visa with a category other than 'student', you must include a certified copy of your visa with your application.			
Are you currently enrolled in an Australian institution?	<input type="checkbox"/> No <input type="checkbox"/> Yes →	Name of institution	
Are you currently studying at UTS?	<input type="checkbox"/> No <input type="checkbox"/> Yes →	Student number	
Do you have Overseas Student Health Cover? (OSHC)	<input type="checkbox"/> No <input type="checkbox"/> Yes →	Provider	Membership number
Are you in the process of applying for permanent residency in Australia? <input type="checkbox"/> No <input type="checkbox"/> Yes			

4. EDUCATION DETAILS

Post-secondary studies		<input type="checkbox"/> No	<input type="checkbox"/> Yes →	List below all the courses you have/are enrolled in	
Course	Institution and country/state	Duration (number of years)	Date awarded / completed (day/month/year)		
			□□ / □□ / □□		
Course	Institution and country/state	Duration (number of years)	Date awarded / completed (day/month/year)		
			□□ / □□ / □□		
Course	Institution and country/state	Duration (number of years)	Date awarded / completed (day/month/year)		
			□□ / □□ / □□		
Do you expect to obtain a qualification this year?		<input type="checkbox"/> No	<input type="checkbox"/> Yes →	Qualification	
Institution				Country	
Have you ever been excluded (or are you facing exclusion) from a course on academic or other grounds?		<input type="checkbox"/> No	<input type="checkbox"/> Yes →	Attach details on a separate sheet. Please attach the details of your exclusion to this application form.	

5. ENGLISH LANGUAGE PROFICIENCY

Is English your first language?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If no, what is your first language?		
Have you already studied in English?	<input type="checkbox"/> No	<input type="checkbox"/> Yes →	At what level?		
Have you taken an English Test?	<input type="checkbox"/> No	<input type="checkbox"/> Yes →	Name of test	Date of test (day/month/year)	Place
				□□ / □□ / □□	
					Test score

6. EMPLOYMENT DETAILS

If the nominated course requires relevant work experience, you must fill in this section. Provide certified copies of references from your employer on company letterhead describing your employment history. Start with your most recent position and attach additional sheets if required. Also provide a copy of your CV/Resume.

<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	<input type="checkbox"/> Hours per week	Dates	From (day/month/year)	To (day/month/year)
				□□ / □□ / □□	□□ / □□ / □□
Name of company					Country
Job title					
<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	<input type="checkbox"/> Hours per week	Dates	From (day/month/year)	To (day/month/year)
				□□ / □□ / □□	□□ / □□ / □□
Name of company					Country
Job title					

7. CREDIT RECOGNITION (FORMERLY RECOGNITION OF PRIOR LEARNING)

Are you seeking credit recognition for subjects from previous post secondary study?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, please fill out the application form for credit recognition (refer to www.sau.uts.edu.au/forms) and include a copy of official subject descriptions.
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8. SUPPORTING STATEMENT

If the nominated course requires you to submit a personal statement, attach a statement to support your application. State why you wish to study the course you have nominated, your major personal/career achievements, why you consider yourself capable of succeeding in the course and how it will contribute to your career goals (500-1000 words).

9. APPLICATION DETAILS

Have you applied to UTS previously?	<input type="checkbox"/> No	<input type="checkbox"/> Yes →	UTS application number
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10. DISABILITY DETAILS

Do you have a disability or ongoing medical condition that will require you to seek special assistance from the university?

 No

 Yes →

Description of disability

If yes, please attach a medical statement from a registered doctor.

11. SPONSORSHIP INFORMATION (SPONSORED APPLICANTS ONLY)

Do you already have a sponsor/scholarship from an organisation or government?

 No (go to 12)

 Yes (Please complete Part A)

If you do not have a sponsor/scholarship, do you intend to apply for a scholarship?

 No (go to 12)

 Yes (Please complete Part A)

Part A

Sponsor/scholarship name

Sponsor mailing address

Sponsor contact person

Sponsor telephone

Sponsor email

Sponsor fax

Please attach copies of letter of guarantee documents from your sponsor (if available)

12. FINDING OUT ABOUT UTS

How did you find out about UTS?

Education exhibition
 Australian embassy
 Magazine or newspaper
 Friends or relatives
 UTS International
 UTS seminar

UTS representative/agent

Agent's name

Internet – which internet search engine do you use?

Internet search engine name

Other

Please specify

Which factors most affected your decision to apply to study at UTS?

Recommendation
 Location
 Course
 Cost of living
 Program fees

Other

Please specify

13. CHECKLIST

Have you

Completed all sections of this application?

Enclosed a certified copy of qualifications including academic transcripts?

Enclosed a bankdraft of A\$100 for the application fee or completed the credit card details below

Enclosed copies of letter of guarantee documents from your sponsor? (if applicable)

Enclosed a certified copy of your passport?

Enclosed a supporting statement and/or portfolio? (if applicable)

Enclosed details of English language proficiency?

Enclosed certified copies of references from employer(s)? (if applicable)

14. DECLARATION AND SIGNATURE

Please sign and return the following declaration. This application form **MUST** be signed by the applicant.

I agree

- > To abide by the rules of admission, enrolment and progression of UTS
- > To inform UTS International immediately of any change to the information I have given in this application form

I declare

- > That the information given in this application form and supporting documents is true and correct
- > That I have access to sufficient funds to cover Tuition Fee payments, living expenses and other related expenses incurred by me and my dependants during my enrolment at UTS
- > That I have personally signed this form

I understand

- > That UTS may obtain official records from any institution I have previously attended
- > That all documents submitted with this application become the property of UTS
- > That UTS may vary or cancel any decision it makes if the information I have given is incorrect or incomplete
- > That UTS may be required to report to the Commonwealth Government on the progress of my application and/or subsequent student status
- > The structure and content of the UTS course/s I am applying for in this application
- > The expenses (tuition fees, living expenses and other expenses) related to the study of this course/s at UTS
- > That I will be responsible for paying all the expenses related to the study of my course at UTS including the tuition fees, living expenses and other related expenses
- > That in order to be admitted to the University I must meet the academic and English language requirements set by UTS and the Genuine Temporary Entrant (GTE) and Genuine Student (GS) criteria set by the Department of Immigration & Citizenship (DIAC). For information about the GTE and GS criteria please visit www.immi.gov.au/students/_pdf/2011-genuine-temporary-entrant.pdf

Your signature

Date (day/month/year)

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We advise that you keep a copy of your application and all attachments for your records.

CREDIT CARD PAYMENT FOR UTS APPLICATION FEE

Applicant's name	Family name/surname																														
	Given name																														
Cardholder's name (as it appears on credit card)	Family name/surname																														
	Given name																														
Type of credit card	<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Amex	Amount <input type="checkbox"/> A\$100																													
Card details	Card number	Expiry date (day/month/year)																													
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SEND APPLICATION TO

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CLOSING DATES FOR COURSEWORK APPLICATIONS

Autumn (Feb) semester – 15 December
Spring (July) semester – 15 June

AN INCOMPLETE APPLICATION WILL DELAY PROCESSING.
LATE APPLICATIONS MAY NOT BE ACCEPTED.