



Agent Stamp
(if applicable)

Study Abroad and Exchange Unit
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 CRICOS No. 00213J

Date Received

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Office Use Only

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Application for Study Abroad and Exchange Programs

- Please complete all sections and print neatly in BLOCK LETTERS.
- Use this form to apply for the Study Abroad and Exchange programs. Do not use this form if you are a citizen of Australia or New Zealand or a permanent resident of Australia.
- Certified copies of your academic transcripts including English translations where necessary must be attached on submission of this form.

1 Personal details

Your Name (as shown on your passport)

Preferred title:	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Miss	<input type="checkbox"/> Dr
Given name/s:					
Family name:					
Preferred name:					
Date of birth:	Day	/	Month	/	Year
Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female			

Citizenship:
Country of birth:
Passport number:
Home telephone:
Fax number:
Email address:

Mailing Address

Number and Street:	
City:	State:
Postcode:	Country:

Home Address

Number and Street:	
City:	State:
Postcode:	Country:

2 Medical disclosure

Do you have a disability, impairment or long-term medical condition which may affect your studies?

<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, please provide details
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3 Educational qualifications

Please give details of all your secondary education and other post-secondary courses that you have attended or are currently studying. You must attach certified copies of your academic results, including English translations where necessary.

Name of school or institution	Name of qualification or examination	Years attended	Course completed?
		to	<input type="checkbox"/> Yes <input type="checkbox"/> No
		to	<input type="checkbox"/> Yes <input type="checkbox"/> No
		to	<input type="checkbox"/> Yes <input type="checkbox"/> No
		to	<input type="checkbox"/> Yes <input type="checkbox"/> No
		to	<input type="checkbox"/> Yes <input type="checkbox"/> No

(eg Bachelor of Bus. GCE 'A' level, etc.)

month/year to month/year

4 English proficiency

English language details (tick the box that describes you).

<input type="checkbox"/> English is the language of instruction at my home institution	<input type="checkbox"/> English is my main/ first language	<input type="checkbox"/> The result of my IELTS test is attached	<input type="checkbox"/> Other English Proficiency results as per agreement
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5 Additional information

Do you speak a language other than English at your permanent home address?

<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes, what is the language spoken most often?
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I heard about QUT from:

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6 Proposed study program

I wish to study the following courses (in order of preference):

NOTE: Exchange applications must be accompanied by a letter from your institutional coordinator.

Please indicate that courses previously studied satisfy the prerequisite requirement for courses you wish to undertake.

Please note that some courses have specific additional admission requirements (for example presentation of a portfolio of your work)

I wish to begin study at QUT in (year):		<input type="checkbox"/> Semester 1 (Feb – June)	Office Use Only
Course code	Course name	Prerequisite completed (if any)	Course approval
1			
2			
3			
4			
5			
6			
7			
8			

I wish to begin study at QUT in (year):		<input type="checkbox"/> Semester 2 (July – Nov)	Office Use Only
Course code	Course name	Prerequisite completed (if any)	Course approval
1			
2			
3			
4			
5			
6			
7			
8			

7 Declaration

I agree to obey the statutes and rules regarding admission and enrolment at QUT. I declare that to the best of my knowledge the information given in this application and the documentation supporting it is correct and complete. I recognise that it is my responsibility to provide all necessary documentary evidence of my qualifications and studies, and hereby authorise QUT to obtain further information if required. I agree to present the original copies of my academic results and transcripts for verification by QUT, if requested. I understand that QUT reserves the right to withdraw my offer or enrolment at any stage during my course where false or misleading information has been provided. I have read and understood the information relating to the courses I have selected, admission procedures, entry requirements, fees and refund policy. I undertake to make timely payments of any fees or associated costs for which I am liable. I am aware of the likely costs of my stay in Australia and I understand that neither QUT nor the Australian Government is obliged to help me if I require financial assistance. I understand that if I have children between the ages of 6 to 15 who will accompany me in Australia, I will be required to pay compulsory school fees. I understand that any information I provide to QUT may be made available to Commonwealth and State Government agencies, and to the Fund Manager of the ESOS Assurance Fund, pursuant to obligations under the ESOS Act 2000 and the National Code.

Applicant's signature:
Day / Month / Year

8 Checklist

Please tick each box to indicate that each item has been completed or enclosed where appropriate. Have you:

- completed all relevant sections of the application form
- made a copy of your application for your records
- listed 6–8 subjects in order of preference for each semester of study at QUT (ensure any prerequisite requirements are met)
- attached all relevant certified documents such as academic transcripts (including current semester) and English language qualifications (if required)
- attached professional accreditation documents (if required)
- provided confirmation of work experience and employment history (if required)
- attached your Curriculum Vitae (not essential)
- provided proof of funding
- attached all relevant translations (must be certified) of the above documents
- read and signed the declaration.

9 Students are to return the completed application form to the address on the front of this form