

# International application for admission

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

## Local representative information

Agent name	Agent URN
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## Student details

Family name		Other names	
Title	Date of birth (dd/mm/yyyy)	Age	Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> (please tick)
Country of birth		Nationality	
Are you a Citizen or Permanent Resident of Australia? Yes <input type="checkbox"/> No <input type="checkbox"/> (please tick)			
Home address			
City		State/Province	
Country		Postcode	
Home telephone number (including country code)		Mobile telephone number (including country code)	
Email			

## Parent/alternative contact details

Name	Relationship to student
Home address (if different from student address)	
City	State/Province
Country	Postcode
Home telephone number (including country code)	Mobile telephone number (including country code)
Business telephone number (including country code)	Fax number (including country code)
Email	

## ATSI, Citizenship and Visa Details

Are you an Australian Aboriginal or Torres Strait Islander? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Do you currently hold, or have you had an Australian Visa in the past 6 months? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Visa type	Visa subclass	Visa expiry date
Have you applied for a Visa to Australia? Yes <input type="checkbox"/> No <input type="checkbox"/>	Have you had a Visa refused for Australia or any other country? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Have you breached any Visa conditions in any country? Yes <input type="checkbox"/> No <input type="checkbox"/>	Have you been convicted of any crime or offence in any country? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Do you have any family in Australia? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, which city are they living in?		

\*If 'Yes', attach a copy of the formal visa refusal notification, along with a statement from you regarding the circumstances of the refusal.

## Passport details

Passport number	Passport expiry date (dd/mm/yyyy)	<b>Please provide a copy of your current passport</b>
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## English language

All international students must demonstrate an acceptable level of English proficiency to gain admission to the ANU College programs. Please provide evidence of your English language proficiency by submitting your latest English language test result taken in the last two years.

<b>Academic IELTS (Score)</b>	Overall	Listening	Reading	Writing	Speaking
Other (please supply)					

For all other tests accepted by the Admissions Department, please refer to [anucollege.edu.au](http://anucollege.edu.au)

## Previous education

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

Name of qualification	Year awarded
Name of school/college/university	
Country/State	Language of instruction
If you are currently completing a qualification, please indicate when you expect to complete this study (mm/yyyy)	

## Course selection

Course	When would you like to start?		Pathway offers for	
			Sponsored Students	ANU Partnership
Academic English Preparation (AEP)	January 2020 <input type="checkbox"/>	April 2020 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	July 2020 <input type="checkbox"/>	October 2020 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access English	December 2019 <input type="checkbox"/>	April 2020 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ANUC Foundation Studies Standard	January 2020 <input type="checkbox"/>	July 2020 <input type="checkbox"/>	<input type="checkbox"/>	
ANUC Foundation Studies Extended	May 2020 <input type="checkbox"/>	November 2020 <input type="checkbox"/>	<input type="checkbox"/>	
ANUC Foundation Studies Rapid	April 2020 <input type="checkbox"/>	October 2020 <input type="checkbox"/>	<input type="checkbox"/>	
ANU Diploma in Computing*	February 2020 <input type="checkbox"/>	July 2020 <input type="checkbox"/>	<input type="checkbox"/>	
ANU Diploma of Creative Design*	February 2020 <input type="checkbox"/>	July 2020 <input type="checkbox"/>	<input type="checkbox"/>	
ANU Diploma of Liberal Studies*	February 2020 <input type="checkbox"/>	July 2020 <input type="checkbox"/>	<input type="checkbox"/>	
ANU Diploma of Music*	February 2020 <input type="checkbox"/>		<input type="checkbox"/>	
ANU Diploma of Science*	February 2020 <input type="checkbox"/>		<input type="checkbox"/>	

\*Courses are delivered by Study Group Australia Pty Limited, trading as ANU College, on behalf of The Australian National University.

## Disability

Do you have a disability, impairment or long-term medical condition which may affect your studies? Yes  No  (please tick) If Yes, please indicate the area/s of impairment:

Acquired brain impairment  Hearing/Deaf  Intellectual  Learning  Physical  Medical condition  Mental illness  Mobility  Vision

If you have a disability, would you like to receive advice on support services, equipment and facilities which may assist you? Yes  No  (please tick)

## OSHC details (if applicable)

Do you currently hold an OSHC policy? Yes  No  (please tick) If Yes, please provide details below.

Name of OSHC provider

OSHC membership number

OSHC expiry date

For your convenience, OSHC will be included automatically on your invoice unless you provide us with details of your alternative policy

Please select type of cover you wish to receive: Single  Dual Family\*  Multi Family\*  (please tick)

\*If you have selected Dual Family or Multi Family OSHC, please also provide a copy of your marriage certificate.

## Declaration and signature (This application must be signed; otherwise it will not be accepted)

By ticking this box I confirm the following:

- I authorise ANU and Study Group Australia Pty Limited trading as ANU College to share and exchange personal and academic information about me for the duration of my enrolment in any program administered by either entity, and later as an alumni of the University if applicable.
- I understand and acknowledge that ANU will handle my personal information in accordance with the Privacy Act 1988 and the ANU Privacy Policy. More information about how personal information is handled by The Australian National University can be found in the ANU privacy policy (available at [policies.anu.edu.au/ppl/document/ANUP\\_010007](http://policies.anu.edu.au/ppl/document/ANUP_010007))

I wish to be considered for admission to the course(s) I have shown on this application form. I agree that where I do not meet the entry requirements for the selected course or suite of courses that I will be offered an alternative Study Group course. I declare that to the best of my knowledge the information supplied within this application and the documentation supporting it is correct and complete. I acknowledge that the provision of false or misleading information may result in non-acceptance of the application or immediate exclusion from ANU College. I authorise ANU College, where necessary, to obtain from any other educational institution evidence of my academic records or seek other corroborating evidence with respect to my application. I also understand that ANU College is required under Section 19 of the ESOS Act 2000, to inform the Department of Immigration and Border Protection about changes to my course enrolment and any breach of my student visa conditions relating to satisfactory academic performance. I also understand that under the provisions of the ESOS Act 2000, ANU College may release information provided in this application to Australian Commonwealth and State agencies.

ANU College is bound by the Privacy Act 1988 of the Commonwealth of Australia. ANU College collects and uses any personal information provided to itself in accordance with the Act. The type of information and the use and disclosure of that information without any prior approval is set out in the Privacy Policy which can be found at [anucollege.edu.au](http://anucollege.edu.au). By signing this application I acknowledge that I have read the Privacy Policy and consent to the use and disclosure of my personal information as set out in the Privacy Policy.

Name (Student or Parent/Legal Guardian)

Date (dd/mm/yyyy)

\*If applicant is under the age of 18.

### Note

- Information provided may be made available to Commonwealth and State agencies and the Director of the Tuition Protection Service, pursuant to obligations under the ESOS Act 2000 and the National Code.
- Any school-aged dependants accompanying overseas students to Australia will be required to pay full fees if they are enrolled in either a government or non-government school.

Send your application to: Admissions Centre

T: +61 2 8880 5608 E: [anziscadmissions@studygroup.com](mailto:anziscadmissions@studygroup.com) or to your local representative

Provider: Study Group Australia Pty Limited. CRICOS Provider Code: 01682E

Provider: The Australian National University. CRICOS Provider Code: 00120C