



Application for Bachelor or Master

1. Personal Details

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Mx
First name	
Middle name(s)	
Last name	
Have you been known by any other names?	<input type="checkbox"/> No <input type="checkbox"/> Yes: _____
Date of birth	____/____/____ (dd/mm/yyyy)
Citizenship(s)	
Country of birth	
Gender	<input type="checkbox"/> male <input type="checkbox"/> female <input type="checkbox"/> _____
Are you a permanent resident of Australia?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you require a student visa for our studies at UNSW?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Passport number (this must be the passport you will be using during your studies)	
Do you currently hold a temporary Australian Visa?	<input type="checkbox"/> No <input type="checkbox"/> Yes: _____
From which country will you be applying for your student visa?	

2. Contact Details (Home Address)

Email address	
Contact phone number	(+____)
Country	
Street name & number	
City	
Postcode	
Is the above your permanent address?	<input type="checkbox"/> Yes <input type="checkbox"/> No (please complete below)
Country	
Street name & number	
City	
Postcode	

3. Additional Personal Details

Have you previously applied for a UNSW program or previously studied at UNSW?	<input type="checkbox"/> No <input type="checkbox"/> Yes: ID _____
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4. Program Information

Program code	
Program name	
Specialization/Major	
Proposed start date	<input type="checkbox"/> Term 1 <input type="checkbox"/> Term 2 <input type="checkbox"/> Term 3 Year: 20_____
Will you be studying in Australia	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will you be studying on campus?	<input type="checkbox"/> on-campus <input type="checkbox"/> off-campus
Will you be studying full-time?	<input type="checkbox"/> full-time <input type="checkbox"/> part-time

5. Additional Program Preferences

Program code (2 nd preference)	
Program name	
Specialization/Major	
Proposed start date	<input type="checkbox"/> Term 1 <input type="checkbox"/> Term 2 <input type="checkbox"/> Term 3 Year: 20_____
Program code (3 rd preference)	
Program name	
Specialization/Major	
Proposed start date	<input type="checkbox"/> Term 1 <input type="checkbox"/> Term 2 <input type="checkbox"/> Term 3 Year: 20_____

6. Tertiary Education (University, etc.)

Study level	<input type="checkbox"/> Undergraduate <input type="checkbox"/> Postgraduate		
Country			
Name of institution			
Degree program (Bachelor of.../etc.)			
Name of main program/study area			
Have you completed this qualification?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
What was your final/is your current grade?			
Start date	____/____ (mm/yyyy)	End date	____/____ (mm/yyyy)
Was English the sole language of instruction and assessment?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Have you already completed another tertiary program? (if yes, complete below)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Study level	<input type="checkbox"/> Undergraduate <input type="checkbox"/> Postgraduate
Country	
Name of institution	
Degree program (Bachelor of.../etc.)	
Name of main program/study area	
Have you completed this qualification?	<input type="checkbox"/> Yes <input type="checkbox"/> No
What was your final/is your current grade?	
Start date	____/____/____ (mm/yyyy)
End date	____/____/____ (mm/yyyy)
Was English the sole language of instruction and assessment?	<input type="checkbox"/> Yes <input type="checkbox"/> No

7. Secondary Education (High School)

In what country did you attend your last secondary school (high school)?	
Qualification (Abitur/ FH-Reife/ etc.)	
Name of school	
Have you completed this qualification?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Overall final grade	
Start date	____/____/____ (mm/yyyy)
End date	____/____/____ (mm/yyyy)

8. English Language Qualification

All applicants are required to provide evidence of their proficiency in the English language.

Is English your first language?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you taken or will you take an English language test?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, which test?	
Test score (if known)	
Test date	____/____/____ (dd/mm/yyyy)

9. Work Experience

Does your chosen program require relevant work experience?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please attach a CV with the relevant details as well as official confirmation from your employer.
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10. Declaration

I declare that the information declared on this form is complete and correct.

I authorise the University to obtain information from any educational institution previously or currently attended by me.

If any information supplied by me is considered to be untrue, incomplete or misleading in any respect, I understand the University may take such action as it believes necessary including the disclosure of the information to any person or body the University considers has a legitimate interest in receiving it and I consent to such disclosure.

I understand the University reserves the right to vary or reverse any decision made on the basis of untrue, incomplete or misleading information.

I have made this application having had access to sufficient information regarding UNSW programs, courses, fees, costs, facilities and services.

I understand the University reserves the right to make alterations to any matter offered in this publication without notice and that this agreement does not remove my right to take further action under the Australian consumer protection laws.

Signature _____ **Date** _____ (dd/mm/yyyy)

11. Application Fee

A non-refundable Application Fee of AUD\$150 must be paid with each application form submitted. I authorize UNSW Sydney to charge to my credit card the amount of AUD\$150, as payment for my application fee.

Name on card			
Type of card		<input type="checkbox"/> Visa <input type="checkbox"/> Master	
Card number			
Expiry date	____/____ (mm/yyyy)	CCV/Security code	

Signature _____ **Date** _____ (dd/mm/yyyy)