

3. VISA DETAILS

Nationality	Country of Birth	Passport Number (if known)
<input type="text"/>	<input type="text"/>	<input type="text"/>

On which type of visa will you be studying? Student Visa Other Temporary Visa

Note: It is your responsibility to ensure that this visa allows you to study and covers the duration of the course for which you have applied.

Please specify

Please attach copies of your personal details from your passport and current Australian visa (if applicable).

4. ENGLISH LANGUAGE PROFICIENCY

Is English your first language? No Yes Were your studies at University conducted entirely in English? No Yes

If English is not your first language please provide English Language test results or evidence from the Registrar of your University that you have been taught and assessed in English.

IELTS overall band *You must attach a copy of your English test results.*

TOEFL score: *Please quote CDU Institutional code 8919 for forwarding results directly to CDU.*

Other score: Test Type Date of Test

If you do not meet the University's English language requirement, would you like to enrol in the University's intensive English Language course (ELICOS)?

No Yes

5. ACADEMIC QUALIFICATIONS FOR CURRENT STUDIES

Tick box if certified documents attached

INSTRUCTIONS: Please provide details of your current studies. You should either (i) request the Registrar of your home institution to send one official transcript to Charles Darwin University, or (ii) attach to this form original or officially certified copies of your transcript. A Certified copy of an original document is one that has been certified as a true copy of the original document by the Study Abroad/Exchange Office in your home university, or an authorised Charles Darwin University representative. Documents not in English must be accompanied by official English translations. A key/guide to the grading system must also be included.

Program/Award	Attendance DAY / MONTH / YEAR to DAY / MONTH / YEAR	Institution / State / Country	Expected Completion Date

6. STUDENTS CURRENTLY STUDYING IN AUSTRALIA - please complete:

Current institution:	Current program:	State:
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* Please attach certified copies of your passport details page and visa. Tick box if certified documents attached

* If successful in your application to Charles Darwin University, a 'Letter of Release' from your current institution may be required.

7. DEPENDENT INFORMATION

1. If accepted as a student do you intend to bring your spouse with you? Yes No
2. If accepted as a student do you intend to bring any dependent children with you? Yes No

If any of your children are of school age, provision must be made for their education. A child is of school age between 6 and 18 years of age and includes a child who is 5 but will be 6 during the school year. Information about schools and costs in the Northern Territory is available at www.deet.nt.gov.au/education

8. DISABILITY DETAILS

Do you have a disability or ongoing medical condition that will require you to seek special assistance from Charles Darwin University?

No Yes

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

9. OVERSEAS STUDENT HEALTH COVER (OSHC)

It is a condition of a student visa that you maintain Overseas Student Health Cover (OSHC) during your stay in Australia. The University has chosen Worldcare as its preferred provider of OSHC and if you are made an offer, the University requires you purchase OSHC Worldcare for the full duration of your program. This protects you from rate rises in OSHC, gives you the security of continuous cover, and discounts are available for the purchase of more than 12 months and up to 36 months duration.

Do you currently have OSHC? No <input type="checkbox"/> Yes <input type="checkbox"/>	If yes, OSHC provider name:
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10. CHECKLIST

To avoid delays in processing your application check that you have attached the following:

- A copy of passport showing personal and visa details (Section 1 and Section 3) if available.
- Proof of your English language proficiency (Section 4) if required.
- Certified copies of all transcripts of results, award certificates, grading systems and English translations if required (Section 5).
- Medical statement, if applicable (Section 8).
- Signed the declaration (Section 11) and the home institution approval (Section 12).

YOUR APPLICATION WILL NOT BE PROCESSED UNTIL THESE DOCUMENTS ARE RECEIVED

11. DECLARATION AND SIGNATURE

I agree:

- to comply with the rules of admission and enrolment at Charles Darwin University;
- to notify the International Office if there is any change to the information I have given in this application;
- to permit Charles Darwin University to release details of my academic progress to my sponsoring body, loan agency or home institution on request;
- to permit Charles Darwin University to access my academic results from other institutions;
- to permit Charles Darwin University to release my contact details to a third party for essential University business, eg DIMA, OSHC provider and CDU Alumni.

I understand that:

- the International Office is not responsible for documents submitted, and the documents become the property of the University;
- my application will be destroyed six months after the proposed program commencement date if I do not enrol at Charles Darwin University or do not advise Charles Darwin University of an alternative commencement date;
- the University may vary or cancel any decision it makes if the information I have given is incorrect or incomplete;
- the University is not obliged to re-enrol me if I do not complete my studies satisfactorily in each semester;
- I am fully responsible for my education and living expenses while studying at Charles Darwin University;
- neither the University nor the Australian Government is obliged or required to help me if I need financial assistance;
- information may be made available to Commonwealth and State agencies pursuant to obligations under the ESOS Act and the National Code.

I declare that the information I have given in this application is correct and complete.

Signature of Applicant	Date DAY / MONTH / YEAR
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12. HOME INSTITUTION APPROVAL

Approved for Study Abroad program, duration	Year
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Signature of Advisor	Date DAY / MONTH / YEAR
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**Please return your completed
application form &
documentation to:**

AA Education Network

26 Kooringa Avenue, Cleveland
QLD 4163

Telephone: +61 7 3488 2916
Email: info@aa-education.com
Web: www.aa-education.com