

Application for admission to the Study Abroad Program

For Study Abroad and Exchange Students

PERSONAL DETAILS									
Family Name					Title e.g. Mr/Mrs/Dr				
Given Names					Male <input type="checkbox"/> Female <input type="checkbox"/>				
Permanent address in home country									
Telephone number in home country									
Fax number in home country									
Address (where we can contact you about your application). If applying through an agent, please put the agent's details here.									
AA Education Network 26 Kooringa Avenue, Cleveland QLD 4163 Telephone: +61 7 3488 2916 Email: info@aa-education.com Web: www.aa-education.com									
Country in which you are submitting this application									
Telephone			Mobile/Cell Phone			Fax			
Email (Where we can contact you about your application)									
Date of Birth		Day		Month		Year			
Citizenship					Country of Birth				
Do you hold a current Australian visa?			<input type="checkbox"/> Yes		<input type="checkbox"/> No		If yes, please give category of visa		
Will you be bringing family members on a dependant student visa?					<input type="checkbox"/> Yes		<input type="checkbox"/> No		

ENGLISH LANGUAGE PROFICIENCY									
English is the main language spoken in my home					<input type="checkbox"/> Yes		<input type="checkbox"/> No		
If no, please indicate language									
<input type="checkbox"/> I will have / or have taken an		<input type="checkbox"/> IELTS test		<input type="checkbox"/> TOEFL test		within the past two years (please tick appropriate box)			
<small>JCU TOEFL Code is 9811</small>									
on		Day		Month		Year		Please attach original documentation	
<input type="checkbox"/> I have undertaken studies (secondary/high school/university) for a minimum of two years in which the language of instruction was English. <i>Please attach documentary evidence.</i>									

STUDY ABROAD PROGRAM									
Duration of Program			<input type="checkbox"/> One Teaching Period/Semester			<input type="checkbox"/> Two Teaching Periods/Semesters			
I wish to study at		<input type="checkbox"/> Townsville		<input type="checkbox"/> Cairns					
I would like to start my studies in Teaching Period					<input type="checkbox"/> One (February)		<input type="checkbox"/> Two (July)		

EDUCATIONAL QUALIFICATIONS

NAME OF SCHOOL OR INSTITUTION	NAME OF QUALIFICATION OR DEGREE	YEARS ATTENDED (MONTH/YEAR TO MONTH/YEAR)	COURSE COMPLETED (YES/NO)

Please attach certified copies of transcripts of all academic records. (A certified copy means a stamped photocopy signed by a public notary or institution representative or authorised JCU agent as being a true and accurate record of the original document). All documents must be translated into English by the issuing institution or by an official translating service.

SUBJECT APPROVALS

Please list a maximum of 6 subjects (one Teaching Period/Semester) or 12 subjects (two Teaching Periods/Semesters) and the corresponding subject code that you would like to enrol in at JCU, in order of preference. For JCU subjects within a specific study area please view the 'Subject Search' at www.jcu.edu.au/courses.

Note: Entry to subject codes 2000-5000 may be restricted to students who have previously completed studies in the same academic area.

SUBJECT NAME	SUBJECT CODE
Example: Rainforest and Ecosystems	BZ3210:03

DECLARATION

DECLARATION (All applicants must complete)

I declare that the information I have supplied on the application form is, to the best of my knowledge, complete and correct. I acknowledge that my application for admission is subject to acceptance by the University which has power to impose conditions. I further acknowledge that in the event my application for admission as a student at the University is accepted by the University, and in consideration of provision of educational resources by the University, I will be bound by the provisions of the relevant student handbooks, statutes, rules and policies of the University as are in force from time to time, and will be subject to the lawful instructions of officers of the University.

PRIVACY

Personal information supplied on this form will be handled in accordance with JCU's Privacy Policy (available at www.jcu.edu.au).

I acknowledge that this information may be provided to other areas of JCU and to third parties for administrative and legislative purposes (under the ESOS Act 2000 and the National Code), including but not limited to the JCU Student Association; JCU's educational representatives and business partners; Australian Commonwealth and State agencies; other academic institutions to verify my previous qualifications; the Fund Manager of the ESOS Assurance Fund; and my Overseas Student Health Cover (OSHC) provider.

Signature

Date

Please send all completed forms to

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