# STUDY ABROAD & EXCHANGE Semester & July School APPLICATION FORM



## **Previous Enrolment**

Have you previously applied to study	or enrolled at ACU or one of	its predecessor colleges?
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No  $\Box$  Yes  $\Box \rightarrow$  Family name on past record:

Student ID (if known):

Personal Details (a	s they appear on yo	ur passport)				
<b>Title</b> (Mr, Mrs, Other)		Family Name				
Given Names			Passport Number			
Previous Name (if changed)			If your academic records are submitted in another name, please provide certified evidence of change of name:			
Date of Birth (dd/mm/yyyy)			Gender	□ Male	E Female	
Country of Citizenship			Country of Birth			
Do you speak a lan	guage other than I	English at your permanent hor	ne address?			
No 🗌 🛛 Yes 🗌	→ Please specify					
Do you have a disa	bility and/or medic	al condition for which addition	nal assistance ma	y be required?		
No 🗌 🛛 Yes 🗌	→ Please attach	a separate sheet outlining this d	isability/condition a	nd assistance requ	uired:	
Contact Details						
Permanent						
Home Address			Country			
Mailing Address			Country			
I am currently residing	🗌 in Australia	Overseas				
Email						
Telephone	Home		Mobile			

## **English Proficiency**

Students who have undertaken their higher education in English in UK, Ireland, USA, Canada, Australia or New Zealand do not need to complete this section or provide evidence of English proficiency.

What is your present level of English?	Elementary		Intermediate	Advanced
Have you taken any English proficiency examinations?	🗆 No	□ Yes →	Please attach your result	s:
Do you intend to take an English proficiency examination in Australia?	🗆 No		Please indicate which ex TOEFL Other:	amination:

Education History					
Current University					
Education History	Record all studies undertaken including high school, preparation / bridging courses, university or college studies				
Cou	Institution Date Commenced Date Completed				
Submit transcripts and certificates for all prior studies, along with a certified translation where the documents are not in English. If you have been awarded professional qualifications (eg. hospital training), please provide evidence of completion.					
Have you ever been excluded from a course and / or institution? No □ Yes □ → Please provide details including effective dates					

Program Selection					
Program	Exchange Study Abroad				
Period of Study (select one or more)	Semester One (Feb – June)     2019     2020		y School ] 2019 ] 2020	□ Semester Two (July – Nov) □ 2019 □ 2020	
Campus	Brisbane     Strathfield       Melbourne     North Sydney       Ballarat     Canberra	🗆 No	orth Sydney	Brisbane   Strathfield     Melbourne   North Sydney     Ballarat   Canberra	
SECTION AL Somo	ster Program Study Plan			- -	
Study Plan	In the space below, please indicate a minir			nces. Include the relevant unit code and title. Idents/study-abroad-and-exchange/semester-program-units	
1.	•		5.		
2.			6.		
3.	7.				
4.			8.		
Study Abroad +	Study Abroad +       Would you like to apply for a Study Abroad + program option?         □ No       □ Yes → Please indicate your preference:       □ Internship       □ Community Engagement				
SECTION B. July S	school Study Plan				
SECTION B: July S					
SECTION B: July S Study Plan	July School unit preference:	its: <u>https:</u>	//www.acu.edu.au	/international-students/july-school/july-school-courses	
	July School unit preference:	or my per	riod of study dur		
Study Plan July School Accommodation	July School unit preference: Refer to the July School website for available unit I require accommodation to be arranged for If Yes, provide your preference:	or my per	riod of study dur	ing ACU July School? I No Yes	
Study Plan July School Accommodation	July School unit preference:         Refer to the July School website for available unit         I require accommodation to be arranged for         If Yes, provide your preference:         Program Packaging         Do you wish to package your semester/yea         If Yes, Please indicate your pro         □ English of A         □ General English	or my per ar abroad gram pre cademid lish →	riod of study dur ☐ Single bedro d with an Englis eference: <b>c Purposes</b> → ☐ 5 Weeks	h Language Program?  No Yes In Oweeks In Oweek	
Study Plan July School Accommodation English Language English Language Program	July School unit preference:         Refer to the July School website for available unit         I require accommodation to be arranged for         If Yes, provide your preference:         Program Packaging         Do you wish to package your semester/year         If Yes, Please indicate your pro         □ English of A	ar abroad gram pre cademid lish →	riod of study dur ☐ Single bedro d with an Englis eference: <b>c Purposes</b> → ☐ 5 Weeks	ning ACU July School? □ No □ Yes No □ Yes h Language Program? □ No □ Yes □ 10 Weeks □ 20 Weeks	
Study Plan July School Accommodation English Language English Language Program Selection	July School unit preference: Refer to the July School website for available unit I require accommodation to be arranged for If Yes, provide your preference: Program Packaging Do you wish to package your semester/yea If Yes, Please indicate your pro English of A General English of A	ar abroad gram pre cademid lish →	riod of study dur ☐ Single bedro d with an Englis eference: <b>c Purposes</b> → ☐ 5 Weeks	h Language Program?  No Yes In Oweeks In Oweek	
Study Plan July School Accommodation English Language English Language Program Selection Academic Referee	July School unit preference: Refer to the July School website for available unit I require accommodation to be arranged for If Yes, provide your preference: Program Packaging Do you wish to package your semester/yea If Yes, Please indicate your pro English of A General English Start date: academic referees for ACU to contact regard	ar abroad gram pre cademi lish →	riod of study dur ☐ Single bedro d with an Englis eference: <b>c Purposes</b> → ☐ 5 Weeks <u>https://www.acu.e</u>	h Language Program?  No Yes In Oweeks In Oweek	
Study Plan July School Accommodation English Language English Language Program Selection Academic Referee Please indicate two	July School unit preference: Refer to the July School website for available unit I require accommodation to be arranged for If Yes, provide your preference: Program Packaging Do you wish to package your semester/yea If Yes, Please indicate your pro English of A General English Start date: academic referees for ACU to contact regard	ar abroad gram pre cademi lish →	riod of study dur ☐ Single bedro d with an Englis eference: <b>c Purposes</b> → ☐ 5 Weeks <u>https://www.acu.e</u>	ing ACU July School?   No   Yes   h Language Program?   No   Yes   10 Weeks   20 Weeks   10 Weeks   20 Weeks   adu.au/international-students/english-and-pathway-programs	

#### Personal Statement (This does not apply to exchange applications)

Please provide a written statement on why you have chosen to study at Australian Catholic University (300 words or less):

Agent Details (This does not apply to exchange applications)				
Are you applying to ACL	I through an authorised ACU agent?	No 🗌 Yes [		
Company Name		Branch / Office		
Contact Person		Phone Number		
Email Address		Fax Number		

### Declaration

ACU is committed to ensuring the privacy of all information it collects. Personal information supplied to the University will only be used for administrative and educational purposes of the institution. Personal information collected by the University will only be disclosed to third parties with the written consent of the person concerned, unless otherwise stated by law. For further information please see the University's Statement on Privacy located at www.acu.edu.au/home/privacy.

I understand that ACU may be required to disclose this information to Australian Government departments and agencies as required or authorised by law. I declare that I have visited the University's website and/or read the International Student Guide, Study Abroad or Exchange Guide and agree to obey the rules and regulations of the Australian Catholic University. I declare that the information supplied herein is correct and complete.

I acknowledge that the submission of incorrect or incomplete information may result in a cancellation of enrolment at any stage. I recognise that it is my responsibility to provide all necessary certified documentary evidence of my qualifications. I authorise the University to obtain further information with respect to my application and, if necessary, provide information to educational institutions and admission centres.

Applicant's Signature:

Date: