

Agent/ Representative Details		Program Selection	
Agency	<input type="text"/>	Email	<input type="text"/>
Address	<input type="text"/>	Address 2	<input type="text"/>
City	<input type="text"/>	Country	<input type="text"/>
P/C	<input type="text"/>	Counsellor	<input type="text"/>
		Program	<input type="text"/>
		Code	<input type="text"/>
		Plan	<input type="text"/>
		Campus	<input type="text"/>
		Intake	<input type="text"/>

Personal Details			
Title:	Family Name:	Given Name:	Middle Name:
Preferred name:	DOB:	Gender:	Citizenship:
Country of birth:	Which country are you applying from:		
State:	City:		
Passport number:	Previous UniSA student ID:		
Do you have a disability or long term illness?		Do you require support services?	
<input type="checkbox"/>		<input type="checkbox"/>	

Contact Details	
Email address:	Secondday email address:
Mobile:	Home Telephone:
Permanent address in home country	
Country:	Address Line 1:
Address Line 2:	Suburb:
State/Province:	Post/Zip code:
Current address	
Country:	Address Line 1:
Address Line 2:	Suburb:
State/Province:	Post/Zip code:

Visa Details	
Do you currently hold an Australian visa?	Type of visa
<input type="checkbox"/>	<input type="text"/>
Have you ever had a visa refused, cancelled or overstayed your visa? <input type="checkbox"/> If yes, please attach the decision record or correspondence.	
Do you intend to apply for an Australian student visa?	Have you ever been refused admission by another Australian provider?
<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been precluded, excluded or suspended from an Australian education provider? <input type="checkbox"/>	
If yes, please provide details <input type="text"/>	
Will you be married at the time you start studying in Australia? <input type="checkbox"/>	

Academic Qualifications			
	Qualification 1	Qualification 2	Qualification 3
Program level:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of program:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of institution:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other name:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Country:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Language:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Duration:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Have you completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Expected completion date:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Do you intend to complete?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attach transcripts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Academic Qualifications Continued

Has it been more than 6 months since you last studied?

Please provide some information on what you have been doing since you completed your last program, including details about work experience you've undertaken during this period.

Credit/Advanced Standing

Do you wish to have any completed tertiary studies considered for credit/advanced standing? If yes, please attach Syllabus/Course outline

English Proficiency

What is your first language?

How do you intend on meeting the English Language requirements for this program?

Have you studied an English language course in Australia? Which English language provider did you study with?

Would you like the University to arrange an English program for you?

English test details

Test type:	<input type="text"/>
Test date:	<input type="text"/>
Overall score:	<input type="text"/>
Listening score:	<input type="text"/>
Reading score:	<input type="text"/>
Writing score:	<input type="text"/>
Speaking score:	<input type="text"/>
Test reference number:	<input type="text"/>
Have you assigned PTE scores to UniSA?	<input type="text"/>
Registration number:	<input type="text"/>

Overseas Student Health Cover

It is a requirement of the Australian Government that you maintain Overseas Student Health Cover (OSHC) for the duration of your student visa. Please choose one of the following:

- Please arrange Visa Length OSHC for myself myself and my partner: myself and my family:
- I am already in Australia and have an existing Overseas Student Health Cover
- I am organising my own Please upload evidence of your own OSHC.
- My sponsor will arrange my OSHC on my behalf:
- I am Norwegian student covered by the National Norwegian Insurance Scheme - I do not require OSHC:
- I am a Swedish student covered by CSN International - I do not require OSHC:
- I am a Belgian student covered by the Belgian Government Insurance Scheme - I do not require OSHC:

Sponsorship Information

Have you applied for a scholarship or will you be sponsored?

Sponsorship details

Sponsor name:	<input type="text"/>	Relationship to you:	<input type="text"/>
Other information about your sponsorship:	<input type="text"/>		

Attach copies of your letter of guarantee documents from your sponsor (if available).

I understand that the University of South Australia may share and discuss my contact details, academic progress, examination results and any issues affecting or relating to my studies (including health issues) with your Sponsor/Nominated Award Administrator.

Personal Representative

Do you wish to authorise the University of South Australia to release information about your application to another person on your behalf?

Title:	Family Name:	Given Name:
Telephone number:	Email:	Relationship to you:

Application Source

Advertising Friends/Family My own research Australian Embassy/High Commission My home School or University UniSA email promotion
 Online Platform Other Other description
 Have you attended an exhibition or event and met with a University representative?
 Which event did you attend?

Applicant Declaration

- I declare that the information provided by me in this application is true and accurate to the best of my knowledge. I agree to tell the University of South Australia immediately if there is any change to the information I have given in this application. I have read and understood the University's Guidelines on Payment and Refund of Fees for International Students.
- I confirm I have sufficient financial resources to pay for travel, tuition and living expenses for myself and any dependants for the duration of my stay in Australia. I understand that if I obtain work in Australia this is considered an opportunity for social interaction and not as a source of income.
- I confirm I am a genuine student and I intend to obtain a successful education outcome and stay in Australia temporarily. I understand the University of South Australia may refuse to assess my application, withdraw an offer or cancel my enrolment if it forms the opinion that I am not a genuine temporary entrant as defined by Australian immigration authorities.
- I authorise the University to release the information and documentation provided in my application to its representatives (including contracted third parties) for their assessment and verification.
- I authorise the University of South Australia and its representatives to make enquiries and obtain information and my official records from third parties including but not limited to the Department of Home Affairs, government bodies, educational institutions previously attended by me, former or current employers and financial institutions. I understand that the University may release my personal information to the University's partner educational institutions, government departments or any other relevant bodies for verification and assessment. I understand that any information obtained will be kept on record and considered when assessing my application for entry into the program.
- I authorise the University of South Australia to access Australian immigration Visa Entitlements Verification Online (VEVO) service at any time to obtain information on my Australian visa status.
- I understand that the University of South Australia may vary or reverse any decision regarding admission or enrolment made on the basis of incorrect, incomplete or fraudulent information or documentation. I understand that the University of South Australia may, in these circumstances, impose an application or enrolment ban on me for a period. I understand the University of South Australia reserves the right to inform other institutions and the relevant government departments of the provision of any such fraudulent documentation or information.
- I understand that the University has obligations under Australian Government legislative requirements and may refuse to assess my application, withdraw an offer or cancel my enrolment as its sole discretion.
- I agree that if I do not meet the entry requirements for the program I have applied for that I can be considered for an alternative program at the University of South Australia and may have my application forwarded to the University's partner pathway providers.
- I acknowledge that the documents submitted with my application become the property of the University and will not be returned to me.
- I understand that the University will provide me with information about its products, services and events. I understand that I can review how my personal information is collected and withdraw my consent at any time by visiting the University's Privacy Policy.

I declare that I have read; understood and agree to the above Declaration and acknowledge that checking this box is the equivalent of a signature.

If you are under the age of 18 at the time of submitting this application, you must provide your parent/guardian details and consent to apply:

Title:	Family Name:	Given Name:
Telephone number:	Email:	Relationship to you: