AUSTRALIA ECU EDITH COWAN UNIVERSITY

PRINT FORM

APPLICATION FOR CROSS INSTITUTIONAL ENROLMENT

Overseas students studying on campus must complete an International Students Application for Admission

Form: SSC-101A/08/11

Have you ever been enrolled at ECU or WACAE? YES ☐ NO ☐

If yes, you must supply your previous Student Number

Have you enrolled at another University since2005 as a Commonwealth Supported/Assisted student: YES ☐ NO ☐

If yes, you need to supply your Commonwealth Higher Education Student Support Number (CHESSN):

PERSONAL DETAILS Title: Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Dr ☐ Prof ☐ Other

Surname/Family Name (Block Letters)

Given Name(s) (Block Letters)

If a previous ECU student, has your name changed since you were last enrolled? YES ☐ NO ☐

If yes, print previous name:

Male ☐ Female ☐ Date of Birth: Day Month Year

Correspondence Address (Number, Street, Suburb, Postcode and Country if not Australia) *(Corr Aust)*

Postcode:

Permanent Home Address (Print 'AS ABOVE' if the same as correspondence address) *(Home Aust)*

Postcode:

Telephone Home: Business:

Fax: Mobile:

Email:

UNIT INFORMATION – What course(s) are you applying for?

UNIT CODE	UNIT TITLE	CAMPUS / EXTERNAL	PRE-REQUISITES YES/NO
		Select	Select
		Select	Select
		Select	Select

To commence course in year: Semester 1 ☐ Semester 2 ☐ Other:

Are you an Edith Cowan University staff member? No ☐ Yes – General ☐ Yes – Academic ☐

OFFICE USE ONLY

Documentation:
- satisfied
- unsatisfactory
- review ECU results
- documentation requested
- other

ADMISSION CATEGORY

BASIS FOR ADMISSION

ALLOCATED TER

Marriage Certificate Required?

Yes ☐ No ☐

Status:

☐ Qualified

☐ Not qualified

☐ Special conditions of entry

Application Approved

Yes ☐ No ☐

Signature, Executive Dean of Faculty (or Nominee)

COURSE	PRE-REQS?

UNIT SET

TEACHING PERIOD

STATISTICAL INFORMATION

Are you of Aboriginal and/or Torres Strait Islander origin?

No ☐ Aboriginal ☐ Torres Strait Islander ☐ Aboriginal and Torres Strait Islander ☐

Citizenship and Residency Status during the semester (You must tick ONE of the five boxes below)

☐ 1. **Australian citizen** (including Australian citizens with dual citizenship)

☐ 2. **New Zealand citizen** or a diplomatic or consular representative of New Zealand, or a member of the staff of such a representative, or the spouse or dependent relative of such a representative

☐ 3. **Permanent Resident** status (excluding those with New Zealand or Australian citizenship)

☐ 4. You have a **Temporary Entry Permit** or are a diplomat or a dependent of a diplomat (except New Zealand) and reside in Australia during the semester

☐ 5. Status other than one of the above (please specify) _____

Do you speak a language other than English at your permanent home residence? YES ☐ NO ☐

If YES, name of non-English language that is spoken most often _____

If born outside of Australia indicate country of birth _____

Year of arrival in Australia ☐☐☐☐ Date permanent residency granted ☐☐ ☐☐ ☐☐☐☐ (Day Month Year)

Do you have a disability, impairment or long term medical condition which may affect your studies? YES ☐ NO ☐

If YES, please indicate the area of impairment:

Acquired Brain Injury ☐ Hearing ☐ Intellectual ☐ Learning ☐ Medical ☐

Mental ☐ Mobility ☐ Physical ☐ Vision ☐ Other _____ (Please Indicate)

EDUCATION QUALIFICATIONS

Please indicate and attach copies if you have completed or commenced any of the following qualifications:

TERTIARY EDUCATION LEVEL (LIST YOUR HIGHEST AWARD IN EACH CATEGORY)	COURSE TITLE	NAME OF INSTITUTION	COMPLETED? YES/NO	YEAR LAST ENROLLED OR COMPLETED
Higher Doctorate, Doctorate, Master's degree, Postgraduate diploma / certificate course from a tertiary institution eg: university, institute of technology, college of advanced education etc			Select	
Bachelor's degree course from a tertiary institution eg: university, institute of technology, college of advanced education etc (List your highest award - if equal, list most recent)			Select	
Associate degree, Advanced Diploma or Diploma course from a tertiary institution eg: university, institute of technology, college of advanced education, teachers' college etc			Select	
TAFE Associate Diploma, Advanced Diploma or Diploma course eg: TAFE college or technical college			Select	
Completed and/or commenced a TAFE award (other than Associate Diploma, Advanced Diploma or Diploma) eg: Certificate IV			Select	

SECONDARY EDUCATION LEVEL	NAME OF INSTITUTION	YEAR OF COMPLETION
Completed final year of secondary education (Year 12) at a high school, district high school etc (not TAFE) Did you sit the WA Tertiary Entrance Examination (TEE)? YES ☐ NO ☐ NOT APPLICABLE ☐		
Completed final year of secondary education (Year 12) at a TAFE college, technical college, evening school		

Completed any other qualification eg: STAT, registered nurse, University Preparation course, PIBT, Alexander College etc	Qualification Title	Name of Institution	

Will you be applying for advanced standing based on previous studies? YES ☐ NO ☐

EDUCATION LEVEL OF YOUR PARENTS OR GUARDIANS

These questions are about the highest level of education completed by your parents or guardians.

The Australian Government of Employment, Education and Workplace Relations requires this information to be collected for statistical purposes.

Tick the relevant box for each parent/guardian

Please answer about the people (up to two) who, during all (or most) of your school years, were your parents or guardians. If you have more than two, answer about those you have spent the most time with.	**Parent/Guardian 1** Male ☐ Female ☐ No Parent/Guardian 1 ☐	**Parent/Guardian 2** Male ☐ Female ☐ No Parent/Guardian 2 ☐
Postgraduate qualification (e.g. Graduate Diploma, Masters degree, PhD)	☐	☐
Bachelor degree	☐	☐
Other post school qualification (e.g. VET Certificate, Associate Degree or Diploma)	☐	☐
Completed Year 12 schooling or the equivalent	☐	☐
Completed Year 10 schooling or the equivalent	☐	☐
Did not complete Year 12 schooling or the equivalent	☐	☐
Did not complete Year 10 schooling or the equivalent	☐	☐
Don't know	☐	☐
Not applicable	☐	☐

DECLARATION

I, _____, declare that the information I have provided
(please print name)
in this application is complete and correct and I authorize Edith Cowan University to verify any facts. I understand that if any information is found to be false this application may be cancelled.

If I subsequently accept an offer and enrol in the course I am applying for, I hereby agree that I will observe the Statutes, By-laws and Regulations of Edith Cowan University.

I acknowledge that it is my responsibility to enrol correctly in accordance with the Admissions, Enrolment and Academic Progress Rules and course requirements.

I accept sole responsibility and hereby declare that the University will be in no way liable for any breach by me of licences and/or agreements covering the use of software or the breach of any relevant provisions of the Copyright Act 1968 (as amended).

I understand that:

- **authority to collect the information on this form is contained in** *The Higher Education Support Act 2003*
- **information is collected for programme administration purposes**
- **information may be shared for these purposes between the Taxation Office, Centrelink, the Department of Education, Science and Training and any other authorized departments**
- **information may not otherwise be disclosed without my consent unless authorized or required by law.**

I consent to receiving information electronically unless alternate communication arrangements have been approved by ECU and agree to access the contents of my Edith Cowan University student e-mail account on a regular basis.

I understand that giving false or misleading information is a serious offence under the Criminal Code.

I understand that during the period of my enrolment, Edith Cowan University may require me to provide documentation to verify my citizenship status.

STUDENT SIGNATURE: **(Print form, sign & submit)**	**DATE:**	

CHECKLIST – Before submitting this Application for Course Admission have you:

☐ Checked that you have completed all the sections of this form (including Education Qualifications)?

☐ Attached copies of your:
- Most recent official academic transcript (web printout not acceptable);
- Approved application for Cross Institutional enrolment from your Home University;
- For undergraduate students: evidence of Fees Status at Home University i.e. latest Commonwealth Assistance Notice or Invoice?

☐ Read and signed the Declaration? (your application will not be processed without your signature)

HOW TO APPLY:

Applications for Cross Institutional Enrolment can be lodged directly to ECU in person or via mail (admissions@ecu.edu.au).

WHERE TO SUBMIT YOUR APPLICATION

In Person at any Student Central Counter:

Bunbury Campus, Robertson Drive, Building 1
Joondalup Campus, 270 Joondalup Drive, Building 18
Mount Lawley Campus, 2 Bradford Street, Building 3

By Post for PERTH METRO CAMPUSES:

Admissions Office
Edith Cowan University
270 Joondalup Drive
JOONDALUP WA 6027

For BUNBURY REGIONAL CAMPUS

Student Administration
Edith Cowan University
South West Regional Campus
585 Robertson Drive
BUNBURY WA 6230

WHEN TO SUBMIT YOUR APPLICATION

Students who are eligible to apply direct to ECU must submit their application before the commencement of the semester, but as there are limited places in some courses we recommend submitting application as soon as possible. Closing dates can change without notice, therefore we advise you to contact ECU to confirm the closing dates by checking our website at: http://reachyourpotential.com.au/ or contacting Student Recruitment on (08) 6304 6304 or email: futurestudy@ecu.edu.au .