

EXCHANGE APPLICATION FORMFOR STUDENTS FROM A VICTORIA UNIVERSITY PARTNER INSTITUTION

1. PERSONAL DETA	AILS				
TITLE: MR /	MISS MS MRS C	THER	GENDER: MALE FEMALE		
FAMILY NAME (AS STAT	ED IN PASSPORT):				
GIVEN NAME(S):					
MOBILE / CELL:					
EMAIL 1:					
EMAIL 2:					
COUNTRY OF BIRTH: DATE OF BIRTH: DD/MM/YYYYY					
COUNTRY OF CITIZENSH	HP:				
DO YOU HAVE A DISABI	ILITY FOR WHICH ADDITIONAL ASSI	STANCE IS REQUIRED?	YES NO (I	f yes, please attach a separat	e document outlining the disability)
2. ADDRESS FOR C	ORRESPONDENCE				
NUMBER AND STREET:					
SUBURB / TOWN:			STATE / PROVIN	 ICE:	
COUNTRY: POSTCODE / ZIP CODE:					
A CURRENT CTUR	IFC IN VOUR HOME COUNTY	NV.			
3. CURRENT STUDIES IN YOUR HOME COUNTRY INSTITUTION: COUNTRY:					
DEGREE PROGRAM: MAJOR FIELD OF STUDY:					
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4. DURATION OF P	PROGRAM	ONE SEMESTER	R = TWO) SEMESTERS	
INTENDED COMMENCEMENT DATE:		SEMESTER 1 (FEB -JUNE) SEMESTER 2 (JULY - NOVEMBER)			
5. UNIT PREFEREN					
List your preferred units of study. Visit vu.edu.au/courses for information about degree programs. Visit vu.edu.au/units/search to search for information about individual units.					
Please check the prerequisites of nominated units.					
• Unit codes and no	ames must be written in full.				
• Select at least 6	preferences to ensure you have end	ough available units while	e studying at VU.		
Select <u>a maximul</u>	m of 2 campuses.				
PREFERENCES	UNIT NAME		UNIT CODE	CAMPUS	COMMENCING SEMESTER AND YEAR
Example:	International Marketing		BH03373	City Flinders	Semester 1, 2015
1st Preference				,	
2nd Preference					
3rd Preference					
4th Preference					
5th Preference					
6th Preference					
7th Preference					
Are you planning on stu	dying a Study Abroad Certificate? [YES NO			
If ves what is the name	e of the certificate?				

6. ENGLISH LANGUAGE PROFICIENCY
If English is not your current language of tuition then you must provide documentary evidence of your English language proficiency to meet Victoria University's English language requirements.
• IS ENGLISH YOUR FIRST LANGUAGE? YES NO
HAVE YOU SAT AN IELTS OR TOEFL TEST? NO (If yes, please attach)
• DO YOU HAVE OTHER DOCUMENTATION (E.G. DAAD, LETTER OF RECOMMENDATION) YES NO (If yes, please attach)
WILL YOU STUDY ENGLISH AT VICTORIA UNIVERSITY PRIOR TO COMMENCING YOUR EXCHANGE? YES NO
7. DECLARATION
I(Applicant's full name in BLOCK LETTERS)
 declare that the information and supporting documentation provided is true and complete. I acknowledge that Victoria University reserves the right at any stage to vary or reverse any decision regarding admission or enrolment made on the basis of incorrect or incomplete information; understand and accept that I must abide by all terms and conditions of my visa; am able to make appropriate arrangements to fund my studies; am fully responsible for my educational and living expenses (excluding tuition fees) while studying at Victoria University; agree to advise the University within seven days if any subsequent changes to my residential address; authorise Victoria University to obtain further relevant documentation if necessary; authorise the University to provide the Commonwealth, State agencies and approved Victoria University's representatives information about my address and details of enrolment; understand that any school-aged dependants accompanying me to Australia will be required to pay full fees if they are enrolled in a school in Australia; and have read, understood and accept the above conditions.
PLEASE TICK HERE TO ACKNOWLEDGE THE DECLARATION: DATE: D D M M Y Y Y Y Y
8. APPLICATION CHECKLIST (INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED)
I have:
completed all sections of this application
acknowledged and dated the declaration
attached certified copies of academic transcripts and award certificates and, where appropriate, certified English translation of academic record
attached copies of English language test scores and other supporting English language documentation as requested
provided a copy of passport photo ID page.
PLEASE E-MAIL YOUR APPLICATION AND SUPPORTING DOCUMENTS TO THE RELEVANT INTERNATIONAL ADVISOR IN YOUR HOME INSTITUTION
9. ENDORSEMENT OF HOME INSTITUTION EXCHANGE/INTERNATIONAL ADVISOR: (NAME)
I HAVE CHECKED THE STUDENT'S DOCUMENTS AND SUPPORT THEIR APPLICATTION FOR EXCHANGE: DATE: DD/MM/YYYYY
INSTRUCTIONS FOR HOME INSTITUTION TO SUBMIT THIS FORM PLEASE EMAIL IT WITH SUPPORTING DOCUMENTS TO: EDUCATIONABROAD@VU.EDU.AU (original documentation by post is not required from Victoria University partner institutions)

Student Exchange Application Form A242 v1.4 CRICOS Provider No. 00124K