APPLICATION FORM

Please print clearly in English and in BLOCK letters. Tick boxes where appropriate

International Student

Australian Citizen/ Permanent Resident

Murdoch INSTITUTE OF TECHNOLOGY MURDOCH UNIVERSITY CAMPUS PERTH

Representative information (if applicable)

Agent name/contact person			
Country			
E-mail			
Telephone	Fax		
For all agent bookings, please confirm who will be responsible for the total payment of this booking by selecting an option below Agent Student Agent and Student (please give details including amounts):			
Agent signature:			

Student information (as shown in passport)

Title		0.1		Male
Mr	Ms	Other		Female
Family name				
First name(s))			
Date of birth	(d/m/y)		Country of birth	
Country of ci	tizenship		First language	
Visa type (if	relevant)		Visa number (if rele	vant)
Permanent a	ddress*			
City				
State/ provir	ice		Postcode	
Country				
Telephone (h	nome/mobil	e)		
E-mail				
Passport nur	nber (if ava	lable)	Expiry date	
Yes	No	N/A	a current Australian Visa? PR or current Australian visa	.)

Education details

Highest academic qualification studied				
Completed Year 12 or equivalent* Yes No	Do you have an ATAR (If studies completed in Australia) Yes No			
Name of Institution				
Country/State	Year awarded			
Language of instruction				
Are you currently studying in Australia? Yes No				
Do you wish to apply for credit or exemptions for any units? Yes No (If yes, please supply full academic details separately)				
Required supporting documentation: Academic results Birth Certific	cate, Citizenship documentation or Passport [†]			

 $^{{\}rm *Refer}\, to\, entry\, requirements\, if\, not\, completed\, in\, Australia.$

English proficiency

Is English you Yes	r first language No	e?		
If yes - please	move on to Pr	ogram Selec	tion	
Please provide	e evidence of y	our English	proficiency qu	ialifications
IELTS	TOEFL	CAE	Pearson	Other (please specify)
Exam score			Test date	e (d/m/y)
Have you met the English entry requirement of the intended course at MIT?				
Yes	No			

Program selection/study plan

General I	English					
Start date: End date:			Number of weeks:			
English f	or Acaden	nic Purpos	es (10 wee	ks)		
Intake	Mar	Apr	Jun	Oct	Nov	
Year:						
Murdoch University Preparation Course Commerce Mass Communication and Media				Information Technology Science		
Intake	Feb	Jun	Oct			
Year:		Nun	ber of Trim	esters:		
Diploma						
	Commerc Mass Cor	-	on and Me	dia	Information Technology	
Intake	Feb	Jun	Oct			
Year:		Nun	ber of Trim	esters:		
Murdoch Degree n Major:	Universit ame:	у				

Additional services

Do you have a disab your studies?	ility, impairm Yes	ent or long-term med No	ical condition which ma	y affect
If yes, please provide medical documentation from a relevant treating professional detailing the impact of your condition on your ability to meet academic demands. Disclosure will not disadvantage your application and is confidential. The information you provide will assist us in best catering for your needs.				
Do you wish to purch		s Student Health Cov Yes	er (OSHC)* through Mur No	doch
If yes, please indicat	e:	Single	Couple	Family
If no, please list your current OSHC details.				
Policy provider:				
Policy number:		Start date:	Expiry date:	

 $^{{}^{\}star}\, {\sf OSHC}\, is\, compulsory\, for\, Student\, Visa\, holders\, and\, their\, accompanying\, family\, members.$

Payment

At this time, I wish to pa	y:		
the enrolment fee	the full program fees		
part of the program	fees FEE-HELP (must be eligible)		
I wish to pay by cre	dit card (MasterCard/Visa)		
I enclose a cheque	for the amount of Payable to Murdoch Institute of Technology		
I would like to arrar	nge a bank transfer.		
Payment to be mad	e to:		
Bank:	HSBC Bank Australia Limited		
Branch:	28 Bridge Street (Exchange) Sydney NSW 2000 Australia		
Swift code:	HKBAAU2S		
BSB:	342-011		
Account number:	461472-163		
Account name:	Account name: Murdoch Institute of Technology		
Payment reference:	Student Name and DOB / MIT Student Number		
I am sponsored by:			

Form continues overleaf.

 $[\]hbox{``Your permanent/home country address is required by the Australian Government. If it is not supplied your application cannot be processed.}$

[†] Please provide a certified copy of your identification and qualifications by post or hand deliver originals for sighting.

Parent/guardian contact details

Title Mr	Ms	Other			Male Female
Family name					
First name(s)					
Relationship	to student (i	.e. mother or	father)		
Permanent a	ddress of Pa	rent or Guardi	an (if different from	previous page)	
E-mail					
Telephone (h	ome/mobile)			
	guardian is a	ware that Und	der 18 students are	required to stay i	n a homestay

Application checklist

Completed all sections of the Application Form

Read and understood the Terms and Conditions

Completed Murdoch University Application Form (if applicable)

Attached certified copies of your academic qualifications (translated into English). If waiting for results then these can be submitted at a later date.

Attached evidence of English language proficiency (if available)

Included a copy of your passport (if available)

Declaration

I have read, understood and agree to be bound by the Terms and Conditions of enrolment attached or as listed on pages 34-35 of the brochure. I declare that I have read the instructions on this application form and that, to the best of my knowledge, the information provided by me is true and complete in every particular. I acknowledge that Murdoch Institute of Technology may vary or reverse any decision regarding admission or enrolment made on the basis of incorrect or incomplete information provided by me. I give permission to Murdoch Institute of Technology to verify or obtain records from other educational institutions that I have attended. I understand that I am seeking temporary entry into Australia for educational purposes only as a fee-paying student. I understand that if I change my visa status, I may be subject to different rules and conditions. I understand the above conditions and am prepared to accept them in full. In particular that I, or my sponsor, will be responsible for the full costs of the academic program for which I am seeking admission, as well as the associated travel and living costs. I give permission to Murdoch Institute of Technology to provide information to my parent(s) or guardian(s) and my agent regarding my application for admission to the program listed above.

I confirm that I have read, understood and agree to the Murdoch Institute of Technology Terms and Conditions attached or as listed on pages 34-35 of the brochure

Signature	Date
Signature of parent/guardian (required if student is under 18 years old)	Date

Please submit your application via your MIT representative or by email to: admissions@murdochinstitute.wa.edu.au

OR via post: Admissions Office, Murdoch Institute of Technology, Building 512, Murdoch University Campus, South Street, Murdoch, Western Australia 6150, Australia