## International Student Application for

## Study Abroad or Exchange Program



## CRICOS Provider Number 00025B

## Instructions

• Answer all questions in sections 1-11.

My TRF number is: ..

Registration number:.....

• If you sat an internet-based TOEFL test, please indicate your registration number and test date:

.....Test date:.

- Do not complete this form if you are an Australian/New Zealand citizen or an Australian
- Please return your completed applic The Manager, Study Abroad and Exc The University of Queensland

	Home institution:  Institution email contact:  Office use only Appl ID:  Appl ID:
ction 4	Institution email contact:  Office use Empl ID:
ction 4	Office use Empl ID:
	Office Empl ID:
	Office Empl ID:
	Office Empl ID:
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	use
	Appl ID:
	AGENT STAMP
Email:	
se attach exchange letter f	from home institution.)
Year:	
line at www.uq.edu.au/st	tudy for course codes and titles.
	Office use only
	,
	No. Type
entry e Offer, which If we	No Yes
entry If ye	No Yes es, please complete the ICTE-UQ application available www.icte.uq.edu.au and return with this application.
entry e Offer, which If ye TE-UQ)? at v	www.icte.uq.edu.au and return with this application.
entry If ye	es, please complete the ICTE-UQ application available
entry e Offer, which TE-UQ)? last two years:	es, please complete the ICTE-UQ application available  www.icte.uq.edu.au and return with this application.  TOEFL IELTS  ogram starts or they cannot be accepted.
entry e Offer, which TE-UQ)? last two years:	es, please complete the ICTE-UQ application available www.icte.uq.edu.au and return with this application.  TOEFL IELTS
entry  e Offer, which TE-UQ)? last two years:  month your UQ degree progresults. If you have not do	es, please complete the ICTE-UQ application available  www.icte.uq.edu.au and return with this application.  TOEFL IELTS  ogram starts or they cannot be accepted.

Print clearly using BLOCK LETTERS and tick boxes where appropriate. Do not write in pencil. We cannot consider your application if it is incompleted on the property of the pr	Brisbane, Queensland 4072, Australia Web www.uq.edu.au/studyabroad Email studyabroad@uq.edu.au Phone +61 7 3365 7941 Fax +61 7 3365 1794			Institution email contact		
incomplete or unreadable.	Phone +61	7 3365 7941 Fax +61 7 3365 1794	Office use	Empl ID:		
1 Personal details			only	Appl ID:		
Family name:						
Given names:				AGENT STAMP		
Date of birth:	Gen	der:				
		enship:				
Country of current residence (country where you have been living for the past three months):						
2 Applicant contact details						
Phone:	Mob	ile:Ema	il:			
Applicant's permanent address outside Australia	a:					
Number and street:						
Suburb/town:	State	х				
Post/zip code:	Cour	ntry:				
Applicant's mailing address (if different from above	e):					
Number and street:						
Suburb/town:	State	х				
Post/zip code:	Cour	ntry:				
Proposed study and commenceme	nt date					
I wish to apply for: Study Abr	oad	Exchange Program (Please attach exchange	letter from hom	ne institution.)		
Program commencement: Semester	1 (February)	Semester 2 (July)  Year:				
How long will you study at UQ? 6 months		12 months				
List the courses in which you wish to enrol:		See the UQ course catalogue online at www.uq.edu	ı.au/study for o	course codes and titles.		
Code		Title		Office use only		
4 English proficiency						
a) Is English your first language?	Yes	(If yes, move to section 6)				
b) If your current level of English language profice requirements and all other entry requirements includes English Language tuition at UQ's Ins	s are met, wou	uld you like to receive a Package Offer, which		Yes e complete the ICTE-UQ application available e.uq.edu.au and return with this application.		
	date of the test	. Test results must still be valid the month your UQ deg tified copies of examinees' TOEFL results. If you have				

companied by official English language translations.  Program/award	Institution na					
		me	Country	Attendance dates (from-to)	Completion/ expected	
				,	completion dat	
Financial support						
o/will you receive a student loan? (eg., US Stafford Lo	an): No Yes					
yes, please provide details:						
Overseas Student Health Cover						
s a condition of a student visa that you maintain Oversean your behalf, The University of Queensland can organise	,					
Yes, I would like UQ to arrange single rate OSHC	for myself					
No, I will make my own arrangements for the dura	ation of my studies at UQ					
I am a Swedish or Norwegian student covered by	a government insurance sch	neme recognised by t	he Australian Governme	nt		
Academic transcripts						
ease advise where you wish your UQ transcripts to	•	•	•			
ontact name:		Contact phone r	number (required for delive	ery purposes):		
ontact address:						
Declaration and signature						
- I	I understand that:					
gree: o The University of Queensland (the University)	• submitted documents support					
communicating with me via electronic means; o permit the University to obtain my academic results	<ul><li>the University may vary or ca</li><li>information is collected on the</li></ul>	nis form and during my	enrolment in order to meet	UQ's obligations under t	he ESOS Act	
rom other institutions directly or through Qualsearch; f any information provided by me is discovered to	and the <i>National Code 2007</i> Australian immigration laws	generally. The authority	to collect this information i	is contained in the Educa	ation Services fo	
be untrue or misleading in any respect, I consent to he University collecting, storing and disclosing this	Overseas Students Act 2000 of Practice for Registration A	uthorities and Provider	s of Education and Training	to Overseas Students 2	007. Information	
nformation to Universities Australia (UA) and UA nember institutions, the Australasian Conference of	collected about me on this for Government and designated					
Fertiary Admission Centres (ACTAC) and any other elevant authority.	Manager. In other instances consent where authorised or		n this form or during my en	rolment can be disclosed	d without my	
declare that the information I have given in this application is correct and complete.		Signature of parent/legal custodian if student is under 18 years of ac				
pplicant's signature:	Parent's/legal custodian's signature:					
ate:	Date:					
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UQ's Privacy Policy is available at www.	uq.edu.au/privacy					
1 Permission to release information (option	onal)					

Delegate's signature: ...