Direct Application form
TAFE (VE), Undergraduate (Associate Degree, Degree, Honours and UniLink Diploma) Postgraduate (Coursework) Studies

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SWINBURNE UNIVERSITY OF TECHNOLOGY

For courses listed on the Victorian Tertiary Admission Centre (VTAC), please note the following:

Direct applications are accepted if you are:

■ Not currently studying a standard Australian year 12 curriculum and

■ Intending to submit an application only to Swinburne

Applicants who are intending to apply to more than one institution or more than one course at the institution should apply through VTAC.

COURSE PREFERENCE

Provide details of your preferred course(s). Refer to Swinburne Course Search (**www.swinburne.edu.au/courses**) for all course details including availability, course code, attendance mode and study load.

PREFERENCE	COURSE TYPE[1]	COURSE CODE	COURSE NAME	ATTENDANCE MODE	CAMPUS	STUDY LOAD	START DATE
(e.g. 1, 2, 3)	(e.g. Bach)	(e.g. BA-Bus9)	(e.g. Bachelor of Business)	(e.g. on-campus)	(e.g. Hawthorn)	(e.g. full-time or part-time)	(e.g. Feb 2015)
1.							
2.							
3.							

[1]Course type

Enter the abbreviated course type, based on the following options:

VE Courses
Advanced Diploma: **ADip**
Diploma: **Dip**
Certificate: **Cert I, II, III, or IV**

Degree Courses
Associate Degree: **AssDeg**
Bachelor Degree: **Bach**
Honours: **Hon**

Postgraduate Courses
Graduate Certificate: **GCert**
Graduate Diploma: **GDip**
Masters by Coursework: **MCwk**

PREVIOUS ENROLMENT OR APPLICATION

Have you previously enrolled at Swinburne? ☐ Yes ☐ No

If yes, please state your Swinburne student ID number:

Have you applied for a Swinburne course in the past 12 months? ☐ Yes ☐ No

PERSONAL DETAILS

Personal information

Title (Mrs, Miss, Ms, Mr, Mx etc): _____ Gender: ☐ Female ☐ Male ☐ Prefer not to answer Date of birth: D D / M M / Y Y

Family name:

Given names:

Previous names:
(if applicable)

Contact information

Home telephone number:

Work telephone number:

Mobile telephone number:

Facsimile number:

Email address:

Postal address:
(Contact)

Number/street

Suburb/city

Country   Postcode

Home address:
(Permanent)

Number/street

Suburb/city

Country   Postcode

Citizenship

Please tick one of the following:

Australia: ☐ Australian citizen (includes Australian citizens with dual citizenships)

New Zealand: ☐ New Zealand citizen

Permanent resident: Country of citizenship:

Visa sub-class number (from your passport):

Type of visa (if known)

Note: If you are a citizen of a country other than Australia or New Zealand without Australian permanent residency, you are not eligible to complete this form. Please go to www.international.swinburne.edu.au/apply

Country of birth

Were you born in Australia? ☐ Yes ☐ No

If no, what is your country of birth?

Year of arrival in Australia: Y Y Y Y

Are you of Australian Aboriginal or Torres Strait Islander descent?

☐ No ☐ Yes, Aboriginal descent ☐ Yes, Torres Strait Islander descent ☐ Yes, Aboriginal and Torres Strait Islander descent

Is English your first language?

☐ Yes ☐ No

If no, what language is spoken at home?

Government student numbers

CHESSN

This is your Commonwealth Government supplied student number. Leave blank if not known.

Victorian Student Number

This is your Victorian Government supplied student number. Leave blank if not known.

USI

This is your Unique Student Identifier. If you do not have a USI, you can apply at www.usi.gov.au

Do you have a disability, impairment or long term medical condition?

Providing information about a disability will not disadvantage your application. This information is collected to ensure that the University provides appropriate information on the support services available to students. This information is also collected for statistical and planning purposes.

☐ No (proceed to ACADEMIC BACKGROUND)

☐ Yes

If yes, please tick one or more of the following:

☐ Hearing　☐ Intellectual　☐ Developmental　☐ Neurological　☐ Acquired Brain Impairment　☐ Vision　☐ Physical　☐ Mental health　☐ Medical

☐ Speech communication　☐ Other (please specify): _____

If you answered yes to this question, you may wish to contact the Disability Support Service for further information concerning the support services available on +61 3 9214 8513 or visit the website www.swinburne.edu.au/stuserv/disability

ACADEMIC BACKGROUND

Pathways direct applicants

Are you applying as a Pathways Direct applicant?　☐ Yes　☐ No

If yes, state your current TAFE (VE) course that you are using as the basis for this application:

Course code: ☐☐☐☐☐☐

Course name: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Pathways Direct is an application method open only to students currently enrolled in a Swinburne TAFE (VE) course who are using their current TAFE (VE) enrolment as the basis for an application for a Swinburne Higher Education course.

Secondary education

What is the highest level of secondary studies you have completed or attempted? (please tick)

☐ VCE　☐ HSC　☐ International Baccalaureate IB　☐ VCAL　☐ Year 11　☐ Year 10　☐ Year 9　☐ Year 8 (or below)

☐ Other (please specify): _____

Was this final year undertaken in Australia?　☐ Yes　☐ No

Details of final or current year of attendance:

Year: ☐☐☐☐　Name of School: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

State: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Country: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Student number (if known): ☐☐☐☐☐☐☐☐☐☐☐☐

Was this final year completed:　☐ Yes　☐ No

Are you applying for Credit, Exemption or Advanced Standing?　☐ Yes　☐ No.　If yes, you must attach a detailed course or unit (subject) outline.

Post-secondary education

List any studies you have completed or attempted at university, TAFE or other post-secondary institution

YEAR STARTED	YEAR COMPLETED OR CEASED	INSTITUTION	TITLE OF COURSE	COURSE TYPE (OFFICE USE ONLY)	COMPLETED
(e.g. 1983)	(e.g. 1984)	(e.g. Swinburne University of Technology)	(e.g. Diploma of Marketing)		(e.g. Yes or No)

Please submit the following documentation with your application:

- A certified copy of all transcripts of results (refer to Page 5: Provide evidence of previous results). If you are currently studying at another institution, you must submit a transcript of results for the current teaching period.
- Proof of completion of academic qualifications.

Have you previously been excluded or suspended from Swinburne or any other educational institution for academic or non-academic reasons?　☐ Yes　☐ No

If yes, institution and reason: ....

EMPLOYMENT HISTORY

Provide details of your employment history in the table below (list up to four positions).

EMPLOYER (INCLUDE POSTCODE)	POSITION	START DATE	END DATE	FULL-TIME OR PART-TIME
(e.g. Dept of Foreign Affairs and Trade, 3000)	(e.g. Senior Administrator)	(e.g. 25/03/1990)	(e.g. 10/11/2008)	(e.g. Full-time)

APPLICANT'S DECLARATION

I declare to the best of my knowledge that the information entered is true, correct and complete. I agree to be bound by the applicable standards of conduct, statutes, regulations, policies and procedures of the University, including any variations to these that the University makes from time to time. By submitting the enrolment, I am liable for all related fees and cost unless I formally withdraw in writing before the associated census date. I understand that: Swinburne University of Technology is required under the Higher Education Support Act 2003 to confirm my entitlement to Commonwealth assistance before my enrolment can be confirmed.

Privacy Statement

I understand that:

Swinburne University of Technology is required to provide the Victorian Government, through the Department of Education and Early Childhood Development, with student and training activity data which may include information I provide in this enrolment form. Information is required to be provided in accordance with the Victorian VET Student Statistical Collection Guidelines (which are available at **www.education.vic.gov.au/training/providers/rto/Pages/datacollection.aspx**). The Department may use the information provided to it for planning, administration, policy development, program evaluation, resource allocation, reporting and/or research activities. For these and other lawful purposes, the Department may also disclose information to its consultants, advisers, other government agencies, professional bodies and/or other organisations. I have been advised by the training organisation that I may be contacted and requested to participate in a National Centre for Vocational Education Research survey or a Department-endorsed project or audit or review.

The Education and Training Reform Act 2006 requires Swinburne University of Technology to collect and disclose my personal information for a number of purposes including the allocation to me of a Victorian Student Number and updating my personal information on the Victorian Student Register.

For students eligible for VET Fee Help, the following privacy statement also applies:

Swinburne University of Technology is collecting the information in this form for the purpose of assessing my entitlement to Commonwealth assistance under the Higher Education Support Act 2003 and allocation of a Commonwealth Higher Education Student Support Number (CHESSN) to me. Swinburne University of Technology will disclose this information to the Commonwealth Department of Industry, Innovation, Science, Research and Tertiary Education (DIISRTE) for those purposes. DIISRTE will store the information securely in the Higher Education Information Management System. DIISRTE may disclose the information to the Australian Taxation Office. Swinburne University of Technology and DIISRTE will not otherwise disclose the information without my consent unless required or authorised by law.

For more information in relation to how student information may be used or disclosed please contact Swinburne's Privacy Officer via email to: infoprivacy@swin.edu.au

I acknowledge and agree to the terms described in this privacy statement:

Signature of applicant: _____   Date: [D][D] / [M][M] / [Y][Y]

SENDING YOUR APPLICATION

Please ensure you have completed this form correctly and that you submit all required supporting documentation.

What supporting documents do you need?

Check what supporting documentation is required for your application using Swinburne Course Search at **www.swinburne.edu.au/courses**

Supplementary forms

You may need to complete a direct application supplementary form, depending on the specific course requirements. Supplementary forms are available from **www.swinburne.edu.au/suppforms**

Submit certified copies only (do not submit original documents)

All supporting documentation must be certified as a true and correct copy of the original by either the issuing body or by a person qualified to witness a statutory declaration (e.g. police officer, chemist, doctor, accountant). Photocopies of previously certified documents are not acceptable.

Provide evidence of previous results

Supporting documentation must include certified copies of all university results or transcripts and graduation certificates. Proof of name and citizenship may also be required. Applicants currently undertaking final year study must submit certified copies of their transcript of results and evidence of completion as soon as results are available.

Note: Internal Transfers or application for further studies from internal students do not require Swinburne academic transcripts.

Provide all supporting documentation in English

Please provide translations of supporting documentation if original documents are in a language other than English.

Where you obtained an award outside Australia, you must also submit:

- Evidence of completion of the relevant award (award certificate or letter of completion)
- Transcripts of results (translated into English)
- Evidence of English language proficiency (e.g. certified copy of IELTS or TOEFL test results certificate) or evidence that study was undertaken in English.

Ensure you attach all the required supporting documentation to your application.

Details of closing dates for applications can be found on Swinburne Course Search (**www.swinburne.edu.au/courses**)

Electronic applications can be sent via email:
domadmit@swin.edu.au

Hard-copy applications can be sent by post to:
National Admissions (H5)
Swinburne University of Technology
PO Box 218
Hawthorn VIC 3122
Australia

Hard-copy applications can also be delivered in person at:
Any Swinburne Student HQ
Hours of operation: 9am to 5pm
(Note: photocopy facilities are NOT available at Student HQ)

If you are applying for an Undergraduate Honours course at Swinburne, please provide the following details. Other candidates are not required to complete this section.

Application details

Which area of study do you wish to apply for? _____

Provide a brief outline of your reasons for applying for the course:

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Describe your proposed research activity for your honours thesis* (100–150 words):

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Do you have a preferred supervisor? ☐ Yes ☐ No

If yes, who is your preferred supervisor? _____

Not applicable for Design Honours applicants. Optional for Business Honours applicants. For Faculty of Information and Communication Technologies Honours applicants, please indicate your interest areas based on project information on the website: www.swinburne.edu.au/ict/courses/undergrad/honours.html

Referees

List two academic staff members who have taught you at third year level and can comment on your academic performance (staff who have taught your major are preferred).

Referee 1

Name:

Work phone:

Email address:

Referee 2

Name:

Work phone:

Email address:

Selection for the Honours course often occurs before your final results are released. Please give the name and telephone number of a contact person from your university whom we may contact regarding your final results.

Name:

Work phone:

Email address:

SIGN APPLICATION

Please ensure you have signed the APPLICANT'S DECLARATION on page 4 of this form.