Master of Dietetics (MA-DIET)

Compulsory Supplementary Information Form



SWINBURNE UNIVERSITY OF TECHNOLOGY

For program commencing in Semester 1, 2024, No Deferrals Permitted

2 Years Full Time Study, Hawthorn, VIC

Students will also be required to attend placement offsite

All students applying for the Master of Dietetics at Swinburne University of Technology must complete this form and attach it to their online application.

Course information and entry requirements are available from: https://www.swinburne.edu. au/study/course/Master-of-Dietetics-MA-DIET/local

For information on course fees, please visit: https://www.swinburne.edu.au/study/master-phd-graduate/fees/

Instructions:

- 1. Please apply directly online via: https://www.swinburne.edu.au/study/master-phdgraduate/apply/
- 2. This form must be completed in full and attached to your online application for your application to be considered.
- 3. Applicants who have completed prerequisite units at a university other than Swinburne must provide university handbook entries and unit outlines, including full unit descriptions, Australian Qualifications Framework (AQF) level and Effective Full-Time Study Load (EFTSL).
- 4. Answers should be typed or written clearly.
- 5. If you change your contact details or address, or wish to withdraw your application after submission, please contact us as soon as possible at <u>rmhughes@swin.edu.au</u>
- 6. Applicants will receive an acknowledgement email of receipt of their Application and Supplementary Form.

Section 1: Personal details

Surname:		Title:	
Given Nam	e/s:	Da	ate of Birth:

Section 2: Meeting prerequisites

a) Bachelor degree

Please complete ONE of the following statements:

I confirm that I have completed a Bachelor of

from......(University) in(year of completion)

and I confirm that I have met the minimum 65% average in final year subjects.

My final year average was.....%.

OR

My final year average thus far is.....%.

b) Prerequisite units

Please select the category which best describes your situation from the list below. Tick ONE BOX only from EITHER the Swinburne applicants OR External applicants section.

SWINBURNE GRADUATES AND STUDENTS (exempt from providing handbook entries and unit outlines of pre-requisite units):

I have completed my degree at Swinburne University of Technology, and

I have completed and obtained results for all of the tertiary	prerequisite units. I have submitted my results with my
application for each prerequisite unit.	

I am currently completing the remaining prerequisite units as non-award units. I would like to be considered for a conditional offer subject to completing the remaining prerequisite units by **February 2024**.

I will complete the remaining prerequisite units as non-award units by **February 2024.** I would like to be considered for a conditional offer subject to completing the remaining prerequisite units by **February 2024**.

I am currently enrolled in a degree at Swinburne University of Technology, and

	I have completed and obtained results for all of the tertiary prerequisite units. I have submitted my results with
n	ny application for each prerequisite unit.

] I am currently completing the remaining prerequisite units. I would like to be considered for a conditional offer subject to completing the remaining prerequisite units by **February 2024.**

I will complete the remaining pre-requisite units by **February 2024** would like to be considered for a conditional offer subject to completing the remaining prerequisite units by **February 2024**.

EXTERNAL APPLICANTS

(Graduates and students from other universities must provide handbook entries and unit outlines of all pre-requisite units in addition to academic transcripts.)

I have completed my degree at another university and

I have completed and obtained results for all of the tertiary prerequisite units. I have submitted my results with my application for each prerequisite unit.

I am currently completing the remaining prerequisite units. I would like to be considered for a conditional offer subject to completing the remaining prerequisite units by **February 2024**

I will complete the remaining prerequisite units by **February 2024**. I would like to be considered for a conditional offer subject to completing the remaining prerequisite units by **February 2024**.

I am currently enrolled in a degree at another university and

] I have completed and obtained results for all of the tertiary prerequisite units. I have submitted my results with my application for each prerequisite unit.

I am currently completing the remaining prerequisite units. I would like to be considered for a conditional offer subject to completing the remaining prerequisite units by **February 2024.**

I will complete the remaining prerequisite units by **February 2024**. I would like to be considered for a conditional offer subject to completing the remaining prerequisite units by **February 2024.**

c) Prerequisite unit details

All applicants must complete the below tables and attach academic transcripts.

IMPORTANT: EXTERNAL APPLICANTS MUST ALSO PROVIDE UNIVERSITY HANDBOOK ENTRIES AND UNIT OUTLINES FOR EACH UNIT LISTED BELOW AS ATTACHMENTS TO THIS FORM.

CHEMISTRY

Minimum two full semester units* at 1st Year Tertiary Level (**AQF level 5) or higher

		Unit details				Status	of unit
University	Unit code	Unit name	AQF Level	EFTSL	Result (%)	Completed: Date (month and year)	Incomplete: Awaiting result (Y/N)

*Note: Two full-semester units are equivalent to 0.250 EFTSL.

**AQF: Most three-year bachelor degrees will be at AQF 5 for 1st year, AQF 6 for 2nd year and AQF 7 for the final year; however, applicants should check their handbooks/unit guides for the AQF of each unit listed.

HUMAN BIOLOGY

Minimum two full-semester units* at 1st Year Tertiary Level (AQF level 5) or higher

	Unit details			Status of unit			
University	Unit code	Unit name	AQF Level	EFTSL	Result (%)	Completed: Date (month and year)	Incomplete: Awaiting result (Y/N)

*Note: Two full-semester units are equivalent to 0.250 EFTSL.

HUMAN PHYSIOLOGY

Minimum two full-semester units* at 2nd Year Tertiary Level (AQF level 6) or higher

		Unit details				Status	of unit
University	Unit code	Unit name	AQF Level	EFTSL	Result (%)	Completed: Date (month and year)	Incomplete: Awaiting result (Y/N)

*Note: Two full-semester units are equivalent to 0.250 EFTSL.

BIOCHEMISTRY

Minimum two full-semester units* at 2nd Year Tertiary Level (AQF level 6) or higher

		Unit details				Status	of unit
University	Unit code	Unit name	AQF Level	EFTSL	Result (%)	Completed: Date (month and year)	Incomplete: Awaiting result (Y/N)

*Note: Two full-semester units are equivalent to 0.250 EFTSL.

NUTRITION SCIENCE

Minimum 1 full time semester* at any tertiary level

		Unit details				Status	of unit
University	Unit code	Unit name	AQF Level	EFTSL	Result (%)	Completed: Date (month and year)	Incomplete: Awaiting result (Y/N)

*Note: One full-semester units are equivalent to 0.120 EFTSL.

FOOD

Minimum 1 full time semester* at any tertiary level

		Unit details				Status	of unit
University	Unit code	Unit name	AQF Level	EFTSL	Result (%)	Completed: Date (month and year)	Incomplete: Awaiting result (Y/N)

*Note: One full-semester units are equivalent to 0.120 EFTSL.

Have you completed any higher degree in addition to your Bachelor Degree (eg. Honours, Masters, PhD)?

Yes/No

If yes, please provide details below: Higher Degree: University: Year Completed:

Section 3: Personal motivation for undertaking the Master of Dietetics at Swinburne

It is important for us to appreciate your personal motivations for applying to study dietetics at Swinburne. This creates an opportunity for you to share a bit about who you are as a person, and your goals in dietetics, and let us know anything about yourself or your application that you want us to know. This motivation statement informs our assessment of your application.

We ask you to please provide a video statement explaining why you would like to study the Master of Dietetics at Swinburne University of Technology.

a. Please upload a short video (of maximum two minutes in length) that conveys your motivation for studying the Master of Dietetics. Please upload this video to a video-sharing platform (such as Youtube or similar) and paste the link here:

b. OPTIONAL: You can also provide a written statement of your motivation below (only relevant if unable to complete a video motivational statement):

c. OPTIONAL: Is there any other relevant information you would like us to know about you?

Section 4: Referees and Relevant work and voluntary experience

REFEREES

You <u>must provide details of 2 professional and/or academic referees</u> who can be contacted to discuss your suitability for the course.

Name	Position title/role held	Contact Details	I have confirmed that
			they are happy to be
			listed on this
			application and
			contacted by
			Swinburne (Y/N)
		Phone:	
		Email:	
		Phone:	
		Email:	

RELEVANT WORK/VOLUNTARY EXPERIENCE

If you would like us to consider any relevant work or voluntary experience, please provide the details below. Please ensure that the contact people listed below are aware that they may be contacted by Swinburne staff

Duration (MM/YY to MM/YY)	Employer	Paid/voluntary	Position title/role held
	Organisation:		
	Contact name:		
	Contact number:		
	Organisation:		
	Contact name:		
	Contact number:		
	Organisation:		
	Contact name:		
	Contact number:		
	Organisation:		
	Contact name:		
	Contact number:		
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Section 5: Declaration and agreement

Please read thoroughly before signing and submitting

1. I(insert name) acknowledge that I understand that the Master of Dietetics program and a career in dietetics requires a high level of interpersonal and communication skills. This includes both verbal and written communication skills in English. I am confident that I possess these skills adequately to successfully meet the requirements of the profession and the Master of Dietetics program.
Note: Applicants who are uncertain about their ability to satisfy these requirements, or have any other circumstances that may impact their ability to complete the course, are encouraged to contact the Course Director of the Master of Dietetics program to discuss their circumstances prior to submitting an application.
2. I declare that all of the information supplied with this application is true and complete.
3. I understand that the University reserves the right to vary or reverse any decision made on the basis of incorrect or incomplete information provided in this application.
4. I authorise Swinburne University of Technology to request and obtain further information from any educational institution or employer/referee in this application to confirm or clarify my suitability and eligibility for the Master of Dietetics program.
5. I confirm that, if required, I will be available for an interview or telephone interview as part of the selection process, and understand that if I am made an offer the offer is for the year of application only and cannot be deferred.
Signature:
Applicant's full name:

Section 6: Completion checklist

Please ensure you have completed your application in full by completing the following:

Section 1: Personal details
Section 2: Meeting prerequisites
Section 3: Motivation statement (video), and other relevant information
Section 4: Referees and Work and voluntary experience
Section 5: Declaration and agreement
Section 6: Completion checklist
AND, I have submitted the following documents to Swinburne University of Technology:
Supplementary Information Form
Academic transcripts
All handbook entries and unit guides regarding my external prerequisite units

Online application form here: https://www.swinburne.edu.au/study/master-phd-graduate/apply/