

UNIVERSITY OF TECHNOLOGY

APPROVAL FROM HOME INSTITUTION FOR CROSS-INSTITUTIONAL STUDY

Your home institution must complete this form if the units of study you wish to undertake are to be counted towards your award program. Please note this form must have a Faculty/Institution stamp Please complete the declaration below I hereby certify that Applicants family name/surname and is granted permission to study the following units at Swinburne for credit towards his/her current course of study: Please indicate the payment basis the student has in his/her current program of study Commonwealth Supported Place Full Fee Domestic Full fee paying place Full Fee International Approving officer's Name: Position Title and Institution Name: Signature: ______ Date: ___ / ___ / ____ Faculty/Institution Stamp: Yes No Enroling Officer approval: Date:

Condition: