

REPRESENTATIVE STAMP

Dual degree application form

SECTION A: PERSONAL DETAILS

Title: Mr Mrs Ms Miss

Family Name
(AS IN PASSPORT)Given Names
(AS IN PASSPORT)Former Name
(IF APPLICABLE)

YOUR DATE OF BIRTH MUST BE WRITTEN WITH THE DAY FIRST, FOLLOWED BY THE MONTH AND YEAR.

Date of Birth / /

If you have a disability or health condition and wish to request support services at Macquarie University, please contact the Disability Support Unit at students.mq.edu.au/support/health_and_wellbeing/disability_service or via email disability@mq.edu.au

APPLICANT HOME COUNTRY CONTACT DETAILS (COMPULSORY)

Street Address

City

State

Postcode

Country

Telephone

 (COUNTRY) (AREA)

Mobile

Email

APPLICANT CURRENT CONTACT DETAILS

IF DIFFERENT FROM THE ABOVE ADDRESS. IF THIS ADDRESS CHANGES, PLEASE ADVISE OUR OFFICE IMMEDIATELY.

Street Address

City

State

Postcode

Country

Telephone

 (COUNTRY) (AREA)

Mobile

Email

SECTION B: CITIZENSHIP AND ENGLISH LANGUAGE PROFICIENCYCountry of Citizenship (AS SHOWN IN YOUR PASSPORT)Country of Birth **(PLEASE ATTACH A COPY OF YOUR PASSPORT PHOTO PAGE)**

Is English your first language?

Yes No PLEASE ATTACH EVIDENCE OF YOUR ENGLISH LANGUAGE PROFICIENCY.

My first language is

Please attach evidence of your language proficiency, if required.

For information on who should provide language proficiency evidence, visit mq.edu.au/study/international/how_to_apply/english_language_requirements/

If you do not meet the English proficiency requirements, you may be eligible for a Package Offer, which includes an appropriate amount of English study at the Macquarie University English Language Centre (or another approved ELICOS provider) before you start your program.

For information on the Macquarie University English Language Centre, visit elc.mq.edu.au**SECTION C: ACADEMIC BACKGROUND**

At which institution are you currently studying?

Country

Qualification / course of study

SECTION D: COURSE PREFERENCECommencement year

Commencing in: Session 1 (FEBRUARY-JULY) Session 2 (JULY-DECEMBER)

Course:

Master in International Business

Master of Commerce in Business PLEASE INDICATE SPECIALISATION BELOW

Master of International Relations

Master of Arts in International Communication

Master of Information Technology

Other



SECTION E: OVERSEAS STUDENT HEALTH COVER

You must hold Overseas Student Health Cover (OSHC) for the entire duration of your stay in Australia. Macquarie University's nominated OSHC provider is Allianz (oshcallianzassistance.com.au).

Do you already have Overseas Student Health Cover (OSHC)?

Yes Provider

Membership Number:

Expiry Date / /

No What type of Overseas Student Health Cover do you require?

Single (cover for yourself only)

Dual (cover for yourself and one dependant)

Multi - Family (cover for yourself and more than one dependant)

SECTION F: DECLARATION

I wish to be considered for enrolment as an international student in a program at Macquarie University and declare that the information submitted is correct and complete. I have read and consent to the University's Privacy Policy, as set out at mq.edu.au/privacy/privacy.html. I understand the University may obtain official records from any school, university or other tertiary institution previously attended by me for the purpose of verification of my supporting documents. All documents submitted become the property of the University and will not be returned. I understand the University reserves the right to vary or reverse any decision made on the basis of incorrect or incomplete information or fraudulent documentation. I recognise that it is an offence to submit fraudulent documentation in support of an application for the purpose of gaining admission to the University. Where fraudulent documents are detected, I understand that my application will be rejected. If an offer has been made, it will be withdrawn. If a visa has been issued, the Department of Immigration and Border Protection will be notified. All matters concerning fraudulent documentation will be reported to the relevant government and statutory authorities, including New South Wales Police, Department of Immigration and Border Protection and Independent Committee Against Corruption. I authorise the University to release any personal information held about me to any other educational institution or authority to verify my student conduct, academic record or supporting documentation for the purpose of determining my eligibility for admission to the University. If applying through an approved Macquarie representative, I authorise the University to release personal and academic information as well as acceptance documentation and transcripts to the representative. I herewith give the University permission to provide my address and details of enrolment to the Department of Immigration and Border Protection and the Department of Education, should I enrol at Macquarie University. I am able to make appropriate arrangements to fund my studies. I have read and understood the University's tuition fee refund policy and conditions set out at international.mq.edu.au/pdfs/Fees_Policy.pdf. I agree to comply with Macquarie University's rules of admission and enrolment. I agree to tell the University immediately if there is any change to the information I have given in this application. I have attached all relevant documents, including my official transcript, passport copy and English language proficiency evidence.

Signature

Date / /

Unsigned applications will not be processed.
Applications must be signed by the applicant personally.
Third parties must not sign on the applicant's behalf.

CHECKLIST

COMPLETE THE FOLLOWING CHECKLIST BEFORE SENDING YOUR APPLICATION:

Academic transcripts (INCLUDING CERTIFIED TRANSLATION, IF APPLICABLE)

English language proficiency evidence (IF APPLICABLE)

Passport copy

EMAIL YOUR COMPLETED FORM TO

miapplications@mq.edu.au

OR, POST YOUR COMPLETED FORM TO

Macquarie International Admissions, Macquarie University, North Ryde, NSW 2109, Australia

FOR AGENT USE ONLY

I have informed the applicant of his/her obligations regarding the 'Privacy and Student Declaration'.

Company

Branch (optional)

Name

Telephone (Country) (Area)

Mobile

Email

Street Address

City

Postcode

Country