

(This form to be used for WA-based programs only)*

Name & Contact Information

Student Number (if applicable)

1. Family Name: _____

2. Given Name: _____ Preferred Name: _____

3. Correspondence Address/Agent Details: _____

Agent Stamp

Global Opportunities
HS-27 2nd Floor, Kailash Colony Main Market
New Delhi: 110048
Ph: 91-29237795, 29247796, 32427795
Fax: 91-11-41632038
Email: helpdesk@global-opportunities.net

Telephone: (Country Code) _____ (Area Code) _____ (Phone No) _____

Facsimile: (Country Code) _____ (Area Code) _____ (Phone No) _____

E-mail: _____ Mobile: _____

4. Overseas Home Address: _____

Telephone: (Country Code) _____ (Area Code) _____ (Phone No) _____

Facsimile: (Country Code) _____ (Area Code) _____ (Phone No) _____ E-mail: _____

5. Date of Birth:

6. Sex: Male Female

7. Country of Birth: _____

8. Nationality/Citizenship: _____

Proposed Program

Undergraduate Postgraduate

9. Commencement Year: _____ Semester 1 (Feb) Semester 2 (July)

Perth Campus Regional Campus (Only selected courses)

10. Course Preferences:

1st Preference: _____ Course Code: _____ Major: _____

2nd Preference: _____ Course Code: _____ Major: _____

English Language Proficiency

11. Do you speak a language other than English at your permanent home residence? Yes No

If yes, indicate the main language spoken: _____

12. Please provide proof of competence in English Language. You must attach certified evidence to show that your English ability meets our requirements, e.g. IELTS or TOEFL; GCE O Level; Cambridge English 1119.

Have you completed a degree or other tertiary qualification in English? Yes No

Qualifications

Please attach certified copies of all academic records. A certified copy is a photocopy stamped and signed by a public notary or education institution representative.

13. Please list all qualifications obtained starting from your final secondary year.

Name of Institution	Name of Award	Course Duration	Years Attended	Completed Yes/No

*Students wishing to apply for external studies are required to complete a different application form available from the central Admissions Office. Please contact them on admissions@ecu.edu.au
CRICOS Institution Provider Code 00279B.

Other Information

14. Work Experience: Please list any relevant work experience.

Employer	Position	Years of Service

15. Disability Declaration: Do you have a disability or any long term medical condition which may effect your studies? Yes No

If yes please indicate the area of impairment to enable the University to provide assistance:

Hearing Learning Mobility Vision Medical

Other: please indicate _____

16. Home Country Emergency Contact

Title: _____ Family Name: _____ Given Name: _____ Relationship: _____

Telephone: _____

Address: _____

17. Do you permit ECU to provide information to your nominated sponsor/guardian or scholarship body? Yes No

18. Release of Academic Results

If your application for direct entry into ECU is unsuccessful, it may be possible for you to be admitted to a course at a vocational education college associated with ECU. Successful completion of a qualification at the college is an alternative entry pathway into ECU.

Would you like us to pass your application to be considered for entry into a vocational course? Yes No

19. **Master or Doctor of Philosophy** programs involving research and a thesis must attach:

- A brief outline of the research topic you wish to undertake (1-2 pages in length)
- Copies of any published papers or journals – if available
- 2 Academic Referees Report – forms are available on the ECU website: www.ecu.edu.au/iso

Your application will not be processed unless you provide the above documents.

20. Declaration

- I hereby certify that the information provided by me is complete and correct. I agree that ECU may, if necessary verify all details provided including my educational qualifications.
- I acknowledge that ECU reserves the right to vary or reverse any decision regarding admission or enrolment made on the basis of incorrect or incomplete information provided by me.
- I authorise the University to use this information in accordance with the principles of the national Privacy Act. If any information I provide is incorrect, untrue or incomplete, I authorise the University to disclose this information and the fact that it is untrue or incomplete to any authority that the University considers necessary or desirable to inform.
- Information supplied in this form may be made available to the Commonwealth and State agencies, pursuant to obligations under the ESOS Act 2000 and the National Code.
- I accept that the information supplied in this application may be made available to the overseas student health cover (OSHC) provider for administrative purposes.
- I hereby agree that I will observe the Statutes, By-laws and regulations of Edith Cowan University. (This is available in the reference sections of all campus libraries.)
- I accept sole responsibility and hereby declare that the University will be in no way liable for any breach by me of licences and/or agreements covering the use of software or for breach by me of any relevant provisions of the Copyright Act 1968.
- I consent to receiving information electronically and agree to access the contents of my Edith Cowan University e-mail account on a regular basis.

Student Signature: _____ Date: _____

21. How did you hear about ECU? Agent Name: _____ Newspaper/Magazine Advertisement Friends/Family

Internet: please list main website _____ Other: please specify _____

Please submit the completed application and certified documents to a ECU representative in your home country or send it directly to:
 ECU International Office, Building 17, Edith Cowan University, Pearson Street, Churchlands 6018, Western Australia.
 Facsimile: (61 8) 9273 8732 E-mail: apply@ecu.edu.au

There is no university application fee payable.

ECU Fees Refund Policy includes the following key points:

- a) Students application for a visa is unsuccessful – Full refund less AUD\$200 administrative cost
- b) Students with a visa withdraws more than 4 weeks before semester commences – 90% refund
- c) Students with a visa withdraws 4 weeks or less before semester commences – 50% refund
- d) Students with a visa withdraws during the first 4 weeks of semester – 50% refund
- e) Students with a visa withdraws after the first 4 weeks of semester – no refund payable

The ECU Fees refund policy is also available online at www.ecu.edu.au/international/admissions/fees.html