

Please print **CLEARLY** in black ink using **BLOCK LETTERS**.

Applications should be submitted to: **Mike Johnson**, CANTEACH, PO Box 79156, Avonhead, Christchurch, New Zealand 8446
 Toll Free: 1-866-488-6700 Direct: 011-64-3-358-8049 Fax: 011-64-3-358-5049
 Or send scanned copy to: mike@canteach.net

PERSONAL DETAILS

Family Name/Surname	Given Names	Preferred or Adopted Given Name	Title (Mr/Mrs/Miss/Ms)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Full Formal Name (for use on formal documents, including degree certificate)

Gender (M/F)	Date of Birth (dd/mm/yy)	Citizenship	Country of Birth
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Correspondence Address	Permanent Address
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Tel	Fax	Tel	Fax
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Your email address

Do you hold a current Australian visa? Yes No If 'Yes', what category?

Do you have a disability or medical condition which may affect your studies?
 If 'Yes', you must attach a separate sheet giving details. Yes No

Have you previously enrolled at Southern Cross University? Yes No

If 'Yes', supply student number.

APPLICATION DETAILS

Please refer to pages one for a list of courses and fees.

Course Preferences	Location	Course Duration	Commencing e.g. Feb 2007
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

ENGLISH LANGUAGE PROFICIENCY

Is English your first language? Yes No If 'No', what is your first language?

Was English the language of instruction in previous secondary or tertiary studies? Yes No
 If 'yes', please indicate the studies that were completed in English and their combined duration.

Studies	Duration
<input type="text"/>	<input type="text"/>

Have you completed a test of English proficiency in the last 2 years? Yes No
 If 'yes', please indicate date taken and test.

Date Taken (dd/mm/yy)	English Test Name	Result (if known)	IELTS Test Report Form Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If you answered 'No' to all of the above English language proficiency questions, you must sit an approved English test and advise results before an Offer of Admission can be made. **NB.** Australian visa regulations require all applicants from specified countries to sit an IELTS test if they have not undertaken an IELTS test in the two years prior to visa application.

OFFICE USE ONLY

<input type="text"/>	<input type="text"/>
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QUALIFICATIONS

Please provide details and documentation of all secondary and tertiary studies completed or currently being undertaken, including explanations of grading systems.

SECONDARY SCHOOL STUDIES

Name of Qualification	School/Institution	State/Country	Year Completed

OTHER STUDIES e.g. University, Technical College, Polytechnic etc. If insufficient space, please attach a separate sheet giving additional details.

From mm/yy	To mm/yy	Full-time/ Part-time	Degree/Qualification	Institution	State/Country	Year Completed

All official transcripts must be submitted, including failures (if any).

Are you CURRENTLY attempting a final year of tertiary study? Yes No

If 'Yes', please indicate the date the results will be available and the name of the qualification.

Date (dd/mm/yy) / / Name of Qualification

Have you been excluded or are you liable for exclusion, on academic or other grounds, from any tertiary institution or faculty and/or course within such an institution following a previous enrolment? Yes No

(If 'Yes', you must attach a separate sheet giving details.)

Are you seeking advanced standing for previous tertiary study? Yes No

If 'Yes', you must submit a certified copy of your transcript/s and complete comprehensive syllabus details for each subject unit for which you are seeking advanced standing. This includes unit descriptions, learning hours, assessment methods and an explanation of the weighting of each unit.

RELEVANT EMPLOYMENT HISTORY If insufficient space, please attach a separate sheet giving additional details.

From mm/yy	To mm/yy	Full-time/ Part-time	Employer	Position	Duties

APPLICATION CHECKLIST

Completed application form Syllabus (if applying for advanced standing)

Academic transcripts Evidence of employment history

English test results

All documents must be originals or certified copies of originals (not photocopies). Translation of documents into English must be carried out by a translation authority.

Where did you first hear about Southern Cross University? e.g. education exhibition, agent (please provide name), Australian Education Centre, Southern Cross University website, other website (please name), magazine, newspaper, educational partner of Southern Cross University (e.g. Aptech, SIIE), current or former student (please give details).

DECLARATION

I declare that the information supplied by me on this form is true and correct in every particular. I acknowledge that Southern Cross University reserves the right to vary or reverse any decision regarding admission made on the basis of incorrect or incomplete information. I authorise Southern Cross University to obtain from other educational institutions, past employers and relevant authorities details of my enrolment, academic record, examination results, employment history, and bond status. I also authorise Southern Cross University to make the information I have provided available to relevant Australian Government and State Agencies as they deem necessary.

Applicant's Signature Date (dd/mm/yy) / /