

|                    |                |
|--------------------|----------------|
| OFFICE USE ONLY    |                |
| Application Number |                |
| Course code        | Receipt number |



CRICOS PROVIDER CODE 00099F

Print ☐ in the appropriate boxes.

## International Student Postgraduate Coursework Application Form

University of Technology Sydney

Please use a black pen and print clearly. Do NOT use this form if you are a citizen of Australia or New Zealand or a permanent resident of Australia.  
**A\$100.00 APPLICATION FEE**

### 1. COURSE PREFERENCES

|                                         |                                                     |                                                |      |  |
|-----------------------------------------|-----------------------------------------------------|------------------------------------------------|------|--|
| First choice                            | UTS course code                                     | UTS course name                                |      |  |
| Second choice                           | UTS course code                                     | UTS course name                                |      |  |
| When do you wish to begin your studies? | <input type="checkbox"/> Autumn session (Feb/March) | <input type="checkbox"/> Spring session (July) | Year |  |

### 2. PERSONAL DETAILS (as shown on your passport)

|                                                                                                                                                                                           |              |           |        |                                                                                                                                   |              |           |                   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------|--------|-----------------------------------------------------------------------------------------------------------------------------------|--------------|-----------|-------------------|
| Family name/surname                                                                                                                                                                       |              |           |        |                                                                                                                                   |              |           |                   |
| Given names                                                                                                                                                                               |              |           |        |                                                                                                                                   |              |           |                   |
| Other given names                                                                                                                                                                         |              |           |        |                                                                                                                                   |              |           |                   |
| Date of birth <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |              |           |        | Sex <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> X (Indeterminate/Intersex/Unspecified) |              |           |                   |
| Your address in your home country (Must <u>not</u> be an Australian address)                                                                                                              |              |           |        |                                                                                                                                   |              |           |                   |
|                                                                                                                                                                                           |              |           |        |                                                                                                                                   |              |           | Postcode/Zip code |
| Tel                                                                                                                                                                                       | Country code | Area code | Number | Mobile                                                                                                                            | Country code | Area code | Number            |
| Email (You must provide your email address)                                                                                                                                               |              |           |        |                                                                                                                                   |              |           |                   |
| Your address for correspondence (or UTS representative company stamp)                                                                                                                     |              |           |        |                                                                                                                                   |              |           |                   |
|                                                                                                                                                                                           |              |           |        |                                                                                                                                   |              |           | Postcode/Zip code |
| Tel                                                                                                                                                                                       | Country code | Area code | Number | Mobile                                                                                                                            | Country code | Area code | Number            |
| Email (You must provide your email address)                                                                                                                                               |              |           |        |                                                                                                                                   |              |           |                   |

### 3. VISA DETAILS

|                                                                                                                                   |  |                             |                                |                     |                                                                                                                                                                             |                                                                                     |  |
|-----------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------|--------------------------------|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--|
| Nationality                                                                                                                       |  |                             |                                | Country of birth    |                                                                                                                                                                             |                                                                                     |  |
| Country of permanent residency                                                                                                    |  |                             |                                | Passport number     |                                                                                                                                                                             |                                                                                     |  |
| Are you already in Australia?                                                                                                     |  | <input type="checkbox"/> No | <input type="checkbox"/> Yes   | Visa category       | Visa expiry date (day/month/year)                                                                                                                                           | Year of entry into Australia                                                        |  |
| If 'Yes' and on a student visa, please provide evidence of your current study.                                                    |  |                             |                                |                     | <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |  |
| If you hold a visa with a category other than 'student', you must include a certified copy of your visa with your application.    |  |                             |                                |                     |                                                                                                                                                                             |                                                                                     |  |
| Are you currently enrolled in an Australian institution?                                                                          |  | <input type="checkbox"/> No | <input type="checkbox"/> Yes ➔ | Name of institution |                                                                                                                                                                             |                                                                                     |  |
| Are you currently studying at UTS?                                                                                                |  | <input type="checkbox"/> No | <input type="checkbox"/> Yes ➔ | Student number      |                                                                                                                                                                             |                                                                                     |  |
| Are you in the process of applying for permanent residency in Australia? <input type="checkbox"/> No <input type="checkbox"/> Yes |  |                             |                                |                     |                                                                                                                                                                             |                                                                                     |  |

#### 4. EDUCATION DETAILS

|                                                                                                       |                               |                             |                                                                                                                                                                                |
|-------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Post-secondary studies                                                                                |                               | <input type="checkbox"/> No | <input type="checkbox"/> Yes ➔ List below all the courses you have/are enrolled in                                                                                             |
| Course                                                                                                | Institution and country/state | Duration (number of years)  | Date awarded / completed (day/month/year)<br><input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> |
| Course                                                                                                | Institution and country/state | Duration (number of years)  | Date awarded / completed (day/month/year)<br><input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> |
| Course                                                                                                | Institution and country/state | Duration (number of years)  | Date awarded / completed (day/month/year)<br><input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> |
| Do you expect to obtain a qualification this year?                                                    |                               | <input type="checkbox"/> No | <input type="checkbox"/> Yes ➔ Qualification                                                                                                                                   |
| Institution                                                                                           |                               | Country                     |                                                                                                                                                                                |
| Have you ever been excluded (or are you facing exclusion) from a course on academic or other grounds? |                               | <input type="checkbox"/> No | <input type="checkbox"/> Yes ➔ Attach details on a separate sheet. Please attach the details of your exclusion to this application form.                                       |

#### 5. ENGLISH LANGUAGE PROFICIENCY

|                                      |                                                                                                                                                                    |                                |                                                                                                                                                                                                                                                                                   |              |                                                                                                                                                                    |          |            |
|--------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------|
| Is English your first language?      | <input type="checkbox"/> No                                                                                                                                        | <input type="checkbox"/> Yes   | If no, what is your first language?                                                                                                                                                                                                                                               |              |                                                                                                                                                                    |          |            |
| Have you already studied in English? | <input type="checkbox"/> No                                                                                                                                        | <input type="checkbox"/> Yes ➔ | At what level?                                                                                                                                                                                                                                                                    |              |                                                                                                                                                                    |          |            |
| Have you taken an English Test?      | <input type="checkbox"/> No                                                                                                                                        | <input type="checkbox"/> Yes ➔ | <table border="1"> <tr> <td>Name of test</td> <td>Date of test (day/month/year)<br/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> </td> <td>Location</td> <td>Test score</td> </tr> </table> | Name of test | Date of test (day/month/year)<br><input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> | Location | Test score |
| Name of test                         | Date of test (day/month/year)<br><input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> | Location                       | Test score                                                                                                                                                                                                                                                                        |              |                                                                                                                                                                    |          |            |

#### 6. EMPLOYMENT DETAILS

If the nominated course requires relevant work experience, you must fill in this section. Provide certified copies of references from your employer on company letterhead describing your employment history. Start with your most recent position and attach additional sheets if required. Also provide a copy of your CV/Resume.

|                                    |                                    |                                         |       |                                                                                                                                                            |                                                                                                                                                          |
|------------------------------------|------------------------------------|-----------------------------------------|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Full-time | <input type="checkbox"/> Part-time | <input type="checkbox"/> Hours per week | Dates | From (day/month/year)<br><input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> | To (day/month/year)<br><input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> |
| Name of company                    |                                    |                                         |       | Country                                                                                                                                                    |                                                                                                                                                          |
| Job title                          |                                    |                                         |       |                                                                                                                                                            |                                                                                                                                                          |
| <input type="checkbox"/> Full-time | <input type="checkbox"/> Part-time | <input type="checkbox"/> Hours per week | Dates | From (day/month/year)<br><input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> | To (day/month/year)<br><input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> |
| Name of company                    |                                    |                                         |       | Country                                                                                                                                                    |                                                                                                                                                          |
| Job title                          |                                    |                                         |       |                                                                                                                                                            |                                                                                                                                                          |

#### 7. CREDIT RECOGNITION (FORMERLY RECOGNITION OF PRIOR LEARNING)

|                                                                                     |                             |                              |                                                                                                                                                                                                                                                                                                                                |
|-------------------------------------------------------------------------------------|-----------------------------|------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Are you seeking credit recognition for subjects from previous post secondary study? | <input type="checkbox"/> No | <input type="checkbox"/> Yes | If yes, please fill out the application form for credit recognition (refer to <a href="https://uts.edu.au/future-students/international/essential-information/credit-recognition">uts.edu.au/future-students/international/essential-information/credit-recognition</a> ) and include a copy of official subject descriptions. |
|-------------------------------------------------------------------------------------|-----------------------------|------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

#### 8. SUPPORTING STATEMENT

If the nominated course requires you to submit a personal statement, attach a statement to support your application. State why you wish to study the course you have nominated, your major personal/career achievements, why you consider yourself capable of succeeding in the course and how it will contribute to your career goals (500-1000 words).

#### 9. APPLICATION DETAILS

|                                     |                             |                                                       |
|-------------------------------------|-----------------------------|-------------------------------------------------------|
| Have you applied to UTS previously? | <input type="checkbox"/> No | <input type="checkbox"/> Yes ➔ UTS application number |
|-------------------------------------|-----------------------------|-------------------------------------------------------|

## 10. DISABILITY DETAILS

Do you have a disability or ongoing medical condition that will require you to seek special assistance from the university?

☐

No

☐

Yes



Description of disability

If yes, please attach a medical statement from a registered doctor.

## 11. SPONSORSHIP INFORMATION (SPONSORED APPLICANTS ONLY)

Do you already have a sponsor/scholarship from an organisation or government?

☐

No (go to 12)

☐

Yes (Please complete Part A)

If you do not have a sponsor/scholarship, do you intend to apply for a scholarship?

☐

No (go to 12)

☐

Yes (Please complete Part A)

### Part A

Sponsor/scholarship name

Sponsor mailing address

Sponsor contact person

Sponsor telephone

Sponsor email

Sponsor fax

**Important:** If your sponsor fails to fulfil their financial obligations, you will be liable for any outstanding fees, charges, debts or any other specified amount properly incurred. See Student Rules 4.1.1 and 4.2.3

Please attach copies of letter of guarantee documents from your sponsor (if available)

## 12. FINDING OUT ABOUT UTS

How did you find out about UTS?

☐

Education exhibition

☐

Australian embassy

☐

Magazine or newspaper

☐

Friends or relatives

☐

UTS International

☐

UTS seminar

☐

UTS representative/agent

Agent's name

☐

Internet – which internet search engine do you use?

Internet search engine name

Which factors most affected your decision to apply to study at UTS?

☐

Recommendation

☐

Location

☐

Course

☐

Cost of living

☐

Program fees

## 13. VISA REFUSAL

Have you or any person(s) included (or intended to be included) in your student visa application or any other family member previously had a visa application rejected, cancelled or have overstayed your/their visit in Australia or any other country?

☐

Yes

☐

No

If “yes” please attach details

## 14. CHECKLIST

Have you:

☐

Completed all sections of this application?

☐

Enclosed a certified copy of qualifications including academic transcripts?

☐

Enclosed a bankdraft of A\$100 for the application fee or completed the credit card details overleaf?

☐

Enclosed copies of letter of guarantee documents from your sponsor? (if applicable)

☐

Enclosed a certified copy of your passport that shows your personal details and signature?

☐

Enclosed a supporting statement and/or portfolio? (if applicable)

☐

Enclosed details of English language proficiency?

☐

Enclosed certified copies of references from employer(s)? (if applicable)

## 15. DECLARATION AND SIGNATURE

Please sign and return the following declaration. This application form **MUST** be signed by the applicant.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>I agree</b></p> <p>1. To abide by the rules of admission, enrolment and progression of UTS.<br/>Go to: <a href="http://www.gsu.uts.edu.au/rules/student/index.html">www.gsu.uts.edu.au/rules/student/index.html</a></p> <p><b>I declare</b></p> <p>1. All the information and supporting documents provided with this Application are true and correct and I will inform UTS immediately of any changes to the information I have given;</p> <p>2. I have accessed sufficient information to understand the structure and content of this course;</p> <p>3. I have access to sufficient funds to cover Tuition Fee payments, Non-tuition Fee payments, living expenses and other related expenses incurred by me and my dependents during my enrolment at UTS;</p> <p>4. That I have personally signed this form.</p> | <p><b>I understand</b></p> <p>1. That UTS may obtain verification/official records from any institution I have previously attended;</p> <p>2. That all documents submitted with this application become the property of UTS;</p> <p>3. That in order to be admitted to the University I must meet the academic and English language requirements set by UTS and the Genuine Temporary Entrant (GTE) and Genuine Student (GS) criteria set by the Department of Home Affairs. For information about the GTE and GS criteria please visit: <a href="http://www.homeaffairs.gov.au/Trav/Stud/More/Genuine-Temporary-Entrant">www.homeaffairs.gov.au/Trav/Stud/More/Genuine-Temporary-Entrant</a></p> <p>4. UTS reserves the right to cancel my offer and acceptance if it is not satisfied that I meet the GTE and GS requirements set by the Department of Home Affairs and/or I am unable to obtain or maintain a student visa;</p> <p>5. That I am fully responsible for my educational and living expenses (tuition fees, non-tuition fees and any other expenses) related to the study of this course/s;</p> <p>6. Tuition Fees, Non-tuition Fees and the Student Services and Amenities Fee (SSAF) increase from year to year, and I accept that it is my responsibility to pay the increased fees as required;</p> <p>7. If I wish to transfer to another provider, I will need to be enrolled at UTS for a minimum period of 6 months before I can request a transfer to another provider;</p> <p>8. UTS will not be responsible for any Tuition Fee and Non-tuition Fee payments, living expenses or other related expenses incurred by me during my enrolment at UTS;</p> <p>9. In the event that false, inaccurate and/or misleading information is provided to UTS and/or the Department of Home Affairs, UTS reserves the right to cancel my application and/or offer and/or enrolment at any time and apply the Refund Protocol as appropriate. For more information go to: <a href="http://www.uts.edu.au/future-students/international/essential-information/fees-information">www.uts.edu.au/future-students/international/essential-information/fees-information</a></p> <p>10. If I fail to pay my Tuition Fees and/or Non-tuition Fee payments UTS will cancel my enrolment;</p> <p>11. If I intend to bring school-aged dependents to Australia, I will be required to pay full fees if they are enrolled in either a government or non-government school;</p> <p>12. The personal information collected on this form and during my enrolment at UTS may be disclosed to the Australian Government and designated authorities where required for compliance with the Education Services for Overseas Students Act 2000 (Cth) and associated legislation with which UTS must comply;</p> <p>13. If I am a sponsored student, the personal information collected by UTS, including academic progress, results, attendance or financial standing, will be disclosed to my sponsor, my embassy, cultural mission or any third party appointed by my sponsor, my embassy and/or cultural mission;</p> <p>14. While on a student visa I am required to inform UTS of any change to my contact details including changes to my residential address, mobile telephone number, emergency contact details or email address within 7 days; and</p> <p>15. If I am or become personally prohibited under any Federal legislation or regulation from commencing or continuing my enrolment in the above course at UTS or any part of that course, UTS reserves the right to withdraw this offer and/or cancel my enrolment in the course or relevant part of that course and retain all fees paid;</p> <p>16. I understand and accept that the \$100 fee is non-refundable and will not constitute part of my tuition fees and/or tuition fee payments.</p> |
| <p>Your signature</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <p>Date (day/month/year)</p> <p><input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <p>Signature of Guardian (if applicant is under 18)</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <p>Date (day/month/year)</p> <p><input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |

We advise that you keep a copy of your application and all attachments for your records.

## CREDIT CARD PAYMENT FOR UTS APPLICATION FEE

|                                                            |                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                             |
|------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Applicant's name</b>                                    | <b>Family name/surname</b>                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                             |
|                                                            | <b>Given name</b>                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                             |
| <b>Cardholder's name</b><br>(as it appears on credit card) | <b>Family name/surname</b>                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                             |
|                                                            | <b>Given name</b>                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                             |
| <b>Type of credit card</b>                                 | <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Amex                                                                                                                                                                                                                                                                | <b>Amount</b> <input type="text"/> <b>A\$100</b>                                                                                                                                                            |
| <b>Card details</b>                                        | Card number<br><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | Expiry date (day/month/year)<br><input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
|                                                            | Cardholder's signature<br>                                                                                                                                                                                                                                                                                                                                     | Date (day/month/year)<br><input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>        |

## SEND APPLICATION TO

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Manager, International Admissions<br/>UTS International<br/>University of Technology Sydney<br/>PO Box 123, Broadway NSW 2007 AUSTRALIA<br/>Tel: 61 2 9514 1531 Fax: 61 2 9514 1530<br/>Application enquiries: <a href="mailto:international.applications@uts.edu.au">international.applications@uts.edu.au</a><br/>Other enquiries: <a href="mailto:international@uts.edu.au">international@uts.edu.au</a><br/>Web: <a href="http://www.international.uts.edu.au">www.international.uts.edu.au</a><br/>UTS will acknowledge receipt of your application by email.</p> | <p><b>Note:</b></p> <ul style="list-style-type: none"> <li>- Admission to courses at UTS is competitive</li> <li>- This application is not an enrolment form, and does not guarantee admission</li> <li>- There is no charge for this form</li> </ul> <p><b>Certified Copies of Supporting Documentation</b><br/>UTS will only accept copies certified by employees from specific organisations. Go to Step 3 of the 'Applying at UTS' webpage for more information: <a href="http://www.int-apply.uts.edu.au">www.int-apply.uts.edu.au</a></p> |
| <p><b>CLOSING DATES FOR COURSEWORK APPLICATIONS</b><br/><b>Autumn session (February/March start)</b><br/>Applicants based outside Australia: 30 November<br/>Applicants based in Australia: 15 December<br/><b>Spring session (July start)</b><br/>Applicants based outside Australia: 30 April<br/>Applicants based in Australia: 31 May</p>                                                                                                                                                                                                                             | <p><b>AN INCOMPLETE APPLICATION WILL DELAY PROCESSING.</b></p> <p><b>LATE APPLICATIONS MAY NOT BE ACCEPTED.</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                             |