

Representative's stamp



DEAKIN
UNIVERSITY AUSTRALIA

Application for admission to DUELI

- » Please complete all sections and print neatly in BLOCK LETTERS.
- » Return this form and attachments to your representative or send to:
**Deakin International, 221 Burwood Highway,
Deakin University, Burwood, Victoria 3125 Australia**
Email: deakin-int-admissions@deakin.edu.au Fax: (+61 3) 9244 5094

Please select a program (details on pages 6–10) you think is suitable for you, calculate your fees payable based on the number of weeks you need to study and fill in the information in this coloured section. Please note this information provided by you in this section may be changed after assessment of your application and supporting documents. Fees and OSHC to be payable by you will be confirmed in the Offer Letter from Deakin.

| | Item | Fee | Amount due (\$A) |
|-----------------|--|------------------------------|------------------|
| Compulsory fees | Enrolment and orientation fee | A\$200 | |
| | Tuition fee | 2009: A\$350 2010: A\$370 | |
| | Overseas Student Health Cover (if applicable) | | |
| Additional fees | Homestay placement fee (if required – must be paid to Deakin University) | A\$200 | |
| | | TOTAL | A\$ |

Personal details

| | | |
|---|-------------|---|
| Title (Dr, Mr, Mrs, Ms, Miss) | Family name | Given name(s) |
| Date of birth (day / month / year) <input type="text"/> / <input type="text"/> / <input type="text"/> | | Male <input type="checkbox"/> Female <input type="checkbox"/> |
| Do you have a medical condition or a disability that requires support while you are at Deakin? Yes <input type="checkbox"/> No <input type="checkbox"/> | | |

Contact Address in home country (If you change your address please advise the DUELI office immediately.)

| | | | |
|--------------------------------------|-----------------------|--------------------------------------|-----------------------|
| Full address | | | |
| | | Country | Postcode |
| Email | | | |
| Telephone () | | Mobile () | |
| <small>Country and Area Code</small> | <small>Number</small> | <small>Country and Area Code</small> | <small>Number</small> |

Please be aware that by supplying your mobile phone number, you may receive reminders and notices by SMS from Deakin.

Address in Australia (If known)

| | | | |
|--------------------------------------|-----------------------|--------------------------------------|-----------------------|
| Full address | | | |
| | | Country | Postcode |
| Email | | | |
| Telephone () | | Mobile () | |
| <small>Country and Area Code</small> | <small>Number</small> | <small>Country and Area Code</small> | <small>Number</small> |

Please be aware that by supplying your mobile phone number, you may receive reminders and notices by SMS from Deakin.

Name of parent or legal guardian in home country (under 18 students only)

| | | |
|--------------------------------------|-----------------------|--------------------------------------|
| Title (Dr, Mr, Mrs, Ms, Miss) | Family name | Given name(s) |
| Full address | | |
| | | Country |
| | | Postcode |
| Email | | |
| Telephone () | | Mobile () |
| <small>Country and Area Code</small> | <small>Number</small> | <small>Country and Area Code</small> |
| | | <small>Number</small> |

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Citizenship

| | |
|---|-------------------------------------|
| Country of citizenship (as on passport) | Country of birth |
| Have you applied for Australian Permanent Resident status? Yes <input type="checkbox"/> No <input type="checkbox"/> | If yes, the date of application / / |
| Visa type (e.g. student, visitor) | Visa expiry date / / |
| Passport number | |

