

Return to Practice and Initial Registration (Overseas Nurses) course

Application and Enrolment



Student ID number

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Please complete if you are
a former Deakin student

01 Personal details

TITLE	FAMILY NAME
GIVEN NAMES	
GENDER (M OR F)	DATE OF BIRTH
PREVIOUS NAME (IF APPLICABLE)	

Office use only

Admission process cat.			
Course code			
Location	Mode	Type	U
Basis for admission			
Correspondence cat.			
Fee category			
Application assessed by	/ /		
Application keyed by	/ /		
Enrolment entered by	/ /		

Updated 11/2009

02 Postal address

No. & STREET	
SUBURB	POSTCODE
STATE COUNTRY	TEL (Mobile)
TEL (Home)	TEL (Business)
FAX	EMAIL

03 Australian Permanent Residency (please attach a certified copy of Australian residency status (not applicable to return to practice students))

04 Nurses Board of Victoria letter (please attach certified copy of letter from NBV confirming your application for registration as a division 1 nurse (dated within previous two years))

05 English language proficiency (not applicable to return to practice students)

Applicants must provide certified documentary evidence of English proficiency.
Which of the following have you attained:

<input type="checkbox"/> An overall B pass in Occupational English Test (OET).	Please indicate test date	<input type="text"/>
<input type="checkbox"/> English Language Testing System (IELTS) – Academic test: a score of at least 7 in all four components of IELTS (Reading; Listening; Writing and Speaking) with an overall band score of at least 7.	Please indicate test date	<input type="text"/>

06 Academic transcript (please attach certified English translation of your academic transcript)

07 Nursing Registration/Licence (please attach certified copy of your nursing registration)

08 Tertiary education

Are you already enrolled in a Deakin course? Yes No

Have you ever been excluded or expelled from a course at any institution? Yes No (If Yes, please supply details)

If your previous studies were at Deakin or one of its antecedent institutions, your application will be handled more expeditiously if you supply a certified copy of your academic transcript. If this is not possible, please provide your student number and the last year of your enrolment.

Deakin Student ID Last year of enrolment

Have you attempted a Return to Practice/Initial Registration (Overseas Nurses) course previously? Yes No Date

If yes, please indicate the name of the institution.

09 Educational history

Qualifications	Year	Institution	Country	Are documents attached? (Y/N)

10 Nursing experience

In addition to completing this section please attach a brief summary of your recent nursing responsibilities as evidence of practice.

Employer	Year started	Year finished	Position	Full time/ Part time	Country

11 Final checklist

Use this checklist to ensure that you have completed ALL the steps necessary for your application.

- Tick if you have completed ALL relevant sections of the application form
- Tick if you have included certified photocopies of ALL relevant documentation
- Tick if you have included ALL relevant supporting information
- Tick if you have signed the Declaration
- Tick if you have completed the statistics on the last page

12 Declaration

- I declare the information supplied by me in this application and the documentation supporting it is complete and correct.
- Where records of prior study have been provided in support of my application, I authorise Deakin University to conduct a search and retrieval of my academic record from my previous institution/s to verify the information contained in my application.
- I acknowledge that the provision of incorrect information or documentation relating to my application may result in withdrawal of any offer of a place and that such withdrawal may take effect at any stage of the course, at the discretion of Deakin University.
- I have read the relevant course information provided including course structure and requirements.
- I acknowledge I have a responsibility to seek course advice prior to varying my enrolment or re-enrolling in future years.
- I agree to pay all fees and charges arising from this enrolment.
- I acknowledge that while I am enrolled, I am subject to the legislation, policies and procedures of Deakin University.
- I consent to the University corresponding with me by electronic means.
- I consent to such of my personal identifying data being provided to the Department of Education, Science and Training (DEST) as is necessary for allocation of a CHESSN (Commonwealth Higher Education Student Support Number).
- I understand that I am required to have access to a computer and the internet and will check my Deakin email account and the Student Portal at least weekly.

Signature Date

Please return your completed application to:

Professional Development Unit
School of Nursing
Faculty of Health, Medicine,
Nursing and Behavioural Sciences
221 Burwood Highway
Burwood Vic 3125

Telephone 03 9251 7776
03 9251 7777

Unit details

You may apply for units to the value of 3 credit points per semester. List below the units for which you seek to enrol. Refer to the Deakin Handbook or website <www.deakin.edu.au/handbook> for valid unit codes, names and credit point values. Note: not all units are offered in both study modes, and most units are only offered in one semester.

Unit code	<input type="text" value="H"/> <input type="text" value="N"/> <input type="text" value="N"/> <input type="text" value="0"/> <input type="text" value="2"/> <input type="text" value="1"/>	Unit name	<input type="text" value="Nursing in Australia"/>			Deakin Selection Officer use only (Please tick) <input type="checkbox"/> Application approved <input type="checkbox"/> Application not approved (Please cross out unit) Reason Name Signature Date
Period	<input type="checkbox"/> CT1 (January) <input type="checkbox"/> CT2 (May)					
Campus	<input type="checkbox"/> Geelong <input type="checkbox"/> Geelong Waterfront <input checked="" type="checkbox"/> Melbourne (Burwood) <input type="checkbox"/> Warrnambool <input type="checkbox"/> Toorak					
Class	<input checked="" type="checkbox"/> D (Day) <input type="checkbox"/> E (Evening) <input type="checkbox"/> X (Off-campus)		<input type="text" value="1"/>	Credit point value		
Unit code	<input type="text" value="H"/> <input type="text" value="N"/> <input type="text" value="N"/> <input type="text" value="0"/> <input type="text" value="2"/> <input type="text" value="2"/>	Unit name	<input type="text" value="Legal and ethical aspects of Australian Nursing practice"/>			Deakin Selection Officer use only (Please tick) <input type="checkbox"/> Application approved <input type="checkbox"/> Application not approved (Please cross out unit) Reason Name Signature Date
Period	<input type="checkbox"/> CT1 (January) <input type="checkbox"/> CT2 (May)					
Campus	<input type="checkbox"/> Geelong <input type="checkbox"/> Geelong Waterfront <input checked="" type="checkbox"/> Melbourne (Burwood) <input type="checkbox"/> Warrnambool <input type="checkbox"/> Toorak					
Class	<input checked="" type="checkbox"/> D (Day) <input type="checkbox"/> E (Evening) <input type="checkbox"/> X (Off-campus)		<input type="text" value=".5"/>	Credit point value		
Unit code	<input type="text" value="H"/> <input type="text" value="N"/> <input type="text" value="N"/> <input type="text" value="0"/> <input type="text" value="2"/> <input type="text" value="3"/>	Unit name	<input type="text" value="Political, social and cultural aspects of nursing in Australia"/>			Deakin Selection Officer use only (Please tick) <input type="checkbox"/> Application approved <input type="checkbox"/> Application not approved (Please cross out unit) Reason Name Signature Date
Period	<input type="checkbox"/> CT1 (January) <input type="checkbox"/> CT2 (May)					
Campus	<input type="checkbox"/> Geelong <input type="checkbox"/> Geelong Waterfront <input checked="" type="checkbox"/> Melbourne (Burwood) <input type="checkbox"/> Warrnambool <input type="checkbox"/> Toorak					
Class	<input checked="" type="checkbox"/> D (Day) <input type="checkbox"/> E (Evening) <input type="checkbox"/> X (Off-campus)		<input type="text" value=".5"/>	Credit point value		
Unit code	<input type="text" value="H"/> <input type="text" value="N"/> <input type="text" value="N"/> <input type="text" value="0"/> <input type="text" value="2"/> <input type="text" value="4"/>	Unit name	<input type="text" value="Clinical learning program"/>			Deakin Selection Officer use only (Please tick) <input type="checkbox"/> Application approved <input type="checkbox"/> Application not approved (Please cross out unit) Reason Name Signature Date
Period	<input type="checkbox"/> CT1 (January) <input type="checkbox"/> CT2 (May)					
Campus	<input type="checkbox"/> Geelong <input type="checkbox"/> Geelong Waterfront <input checked="" type="checkbox"/> Melbourne (Burwood) <input type="checkbox"/> Warrnambool <input type="checkbox"/> Toorak					
Class	<input checked="" type="checkbox"/> D (Day) <input type="checkbox"/> E (Evening) <input type="checkbox"/> X (Off-campus)		<input type="text" value=""/>	Credit point value		

2009 Statistics

- Your application or enrolment cannot be completed without these statistics.
- If you have not lodged a statistics form previously, please complete.
- If you have lodged a statistics form previously, have there been any changes to the information provided? If so, indicate the changes on this form and sign where indicated.
- These statistics are required by the Department of Education, Science and Training.
The information on the enrolment form is sought for the purpose of study in an educational institution.

Personal statistical details

01 Are you of Aboriginal or Torres Strait Islander descent? (Select one only)

- No
 Yes—Aboriginal
 Yes—Torres Strait Islander
 Yes—Aboriginal and Torres Strait Islander

02 What is your citizenship status during this year? (Select one only)

- Australian Citizen
 New Zealand Citizen (see **03**)
 Permanent Humanitarian Visa Holder (proof required—see **03**)
 Permanent Visa Holder (not Humanitarian—see **03**)
 Temporary Entry Permit Holder
 Other status

03 If you are a student who is a New Zealand Citizen, has Permanent Residence status, or is the holder of a Permanent Humanitarian Visa, select a statement that best describes your circumstance below.

- You are residing inside Australia for the Semester or outside Australia as a requirement of the course.
 You are residing outside Australia for the Semester but not because of a requirement of the course.

04 In what country is your permanent home address?

- Australia Postcode
 Other country Name

05 In what country is your residence during the year?

- Australia Postcode
 Other country Name

06 In what country were you born?

- Australia
 Other country Name
 Year of arrival in Australia

07 Do you speak a language other than English at your permanent home residence?

- Yes No Language

Educational details

08 If you are an Australian school leaver, what was your home postcode in your last year of Secondary School?

09 What is your highest educational attainment prior to commencement? (Select one only)

- Postgraduate course
 Bachelor Degree course
 Higher Education Sub-degree course
 Incomplete Higher Education course
 TAFE award course
 Final year of secondary education at school or TAFE
 Other qualification or certificate of attainment or competence
 No prior educational attainment

What was your last year of enrolment in the course which is your highest level of attainment?

10 If you have undertaken prior undergraduate studies please provide the name of the institution at which you studied?

Accessibility requirements

11 Do you have a disability, impairment or long-term medical condition which may affect your studies?

- Yes No

12 If 'Yes' to '11', please indicate the area(s) of impairment?

- Hearing Learning
 Mobility Vision
 Medical Other

13 If 'Yes' to '11', would you like to receive advice on support services, equipment and facilities which may assist you?

- Yes No

I hereby declare that the information provided is correct and complete

Signature

Date / /



Professional development for health professionals

Return to Practice and Initial Registration (Overseas Registered Nurses) Course

This non-award 14 week Return to Practice and Initial Registration (Overseas Nurses) course is specifically designed to fulfill registration requirements for Division 1 of the Nurses Board of Victoria (NBV) for nurses who:

- i have previously been registered in Australia, but have not had sufficient nursing practice in the preceding five years: or
- ii are from overseas wishing to obtain initial registration in Victoria.

Objectives

Completion of the course will enable the student to:

- provide comprehensive nursing care in contemporary health care settings in Australia;
- foster the development of critical reasoning and reflection, conceptualization, innovative thinking and the ability to transfer skills and knowledge to new and novel situations;
- develop attitudes and skills achieving Australian Nursing and Midwifery Council (ANMC) competencies in nurse practice;
- facilitate a broad understanding of the professional and ethical responsibilities aligned with being a registered nurse;
- use a range of information technologies including word processing and retrieving of information;
- increase the knowledge of the Australian social, cultural, political and economic context in which health services operate and where graduates are employed;
- develop the skills for independent study and a commitment to life-long learning; and
- encourage graduates to take responsibility for the development of nursing as a discipline and profession.

Course Structure

The course is divided into two components, a six week academic component and an eight week clinical component.

Academic Learning Program: Six (6) weeks

The academic program comprises six (6) weeks of full-time study, based on the Burwood campus, providing a broad overview of nursing practice in the contemporary Australian society and health care system. The program is offered in three different modules of study, including nursing laboratory skills.

Units Offered

HNN021 Nursing in Australia
HNN022 Legal and Ethical Aspects of Australian Nursing Practice
HNN023 Political, Social and Cultural Aspects of Nursing in Australia
HNN024 Clinical Learning Program

Clinical Learning Program: Eight (8) weeks

Each student on completion of the course will demonstrate the minimum standards of competence as per the Australian Nursing Council's National Competency Standards prior to being recommended for registration.

The clinical learning program aims to provide an opportunity for the student to consolidate their experience in the Australian clinical environment under the supervision and guidance of expert clinicians and clinical facilitators at a ratio of 1:8. Students are supernumerary during the eight (8) weeks.

Admission Requirements

Applicants must:

- be permanent Australian residents or have a current visa (for advice contact your nearest Australian Diplomatic Mission);
- be overseas qualified nurses; and
- have obtained approval from the Nurses Board of Victoria (GPO Box 4932 Melbourne 3001 Australia) to participate in the course.

Completed application forms **must** be accompanied by the following:

- a letter from the Nurses Board of Victoria (NBV), confirming your application for re-registration as a division 1 nurse (dated within the previous two years);
- proof of achievement of an overall 'B' pass or above in all four sections in the Occupational English Test (OET), achieved in one sitting, or an International English Language Testing System (IELTS) with a minimum of 7 in all four components (Reading; Listening; Writing and Speaking obtained in one sitting for the test);
- evidence of Australian permanent residency where applicable.

Applications received without the relevant documentation requested on the application form will not be processed. Successful candidates will be notified by mail as soon as is reasonably possible.

Course Cost

This is a full fee paying program. International students should contact Deakin International directly for details of course fees. Australian residents should access tuition fees at www.deakin.edu.au/fees. Students may be eligible for FEE-HELP (www.goingtouni.gov.au). Students may pay their tuition as follows;

- Pay the tuition fee up front
- Receive a FEE-HELP loan for the full tuition fee
- Pay some of the tuition fee up front and receive a FEE-HELP loan for the remainder of the tuition fee.
- Department of Human Services scholarship.

Note that payment alone does not guarantee recommendation for registration with the Nurses Board of Victoria within Division 1 of the register: this requires successful completion of the course.

Course Location

The course is currently offered on the Melbourne (Burwood) campus. This course will only be offered subject to minimum enrolments and the availability of suitable clinical venues.

Further Information and an application form

Australian Permanent Residents only

The Professional Development Unit
Deakin University
221 Burwood Highway
Burwood Victoria 3125 Australia.
Telephone 61 3 92517776 Facsimile 61 3 92446159
CRICOS Provider Code: 001138

International applicants

Deakin International
70 Elgar Road
Burwood Victoria 3125 Australia
Telephone 61 3 9244 5510 Facsimile 61 3 9244 5094
<http://www.deakin.edu.au/international/>

While the information in the publication was correct at the time of publication, Deakin University reserves the right to alter, amend or delete details of the course offerings listed and other information. July 2009

For more information Telephone +61 3 9251 7776 hmnbs-support@deakin.edu.au