BOND UNIVERSITY

OFFICE OF ADMISSIONS
Bond University
University Drive, Robina
Queensland 4229 Australia
Ph: +61 7 5595 1038
Fax: +61 7 5595 4062
Email: studyabroad@bond.edu.au
Web: www.bond.edu.au
CRICOS CODE 00017B

AEX

Admissions Manager/Agent's Stamp

Application sent:

Application for "The Australian Experience" Study Tour Programs

1 Personal Details

Title

Surname or family name

Given name(s)

Preferred name (or nickname)

Male ☐ Female ☐

Date of birth

Day Month Year

Country of birth

Citizenship

Are you an Australian resident?
(if yes, please provide a copy of your visa with this application) Yes ☐ No ☐

Phone (include area code)

After hours / home

Mobile

Business hours / work

Fax (include area code)

Address for correspondence (overseas applicants do not use PO Box No.)

State

Postcode / Zip code

Country

Email

Please print clearly – your email address will be used for all correspondence regarding the processing of your application.

Permanent home address

State

Postcode / Zip code

Country

Special dietary or other requirements

Please advise us here, or in an attachment to this registration form, of any dietary, physical or health conditions of which the tour coordinator should be aware, and in which you may require assistance. The support available to people with a particular handicap may be limited. Completing the program tour and getting the most from it will involve some walking and outdoor activities. Consult the program coordinator if in doubt about whether assistance available will be adequate.

2 Next of Kin (or personal contact at home during the program)

Name

Relationship

Permanent home address

State

Postcode / Zip code

Country

Phone (include area code)

After hours / home

Mobile

Business hours / work

Email

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3 High School / Matriculation Studies

Give details of your high school studies (eg. Senior, HSC, "A" Levels, Senior High School).

Year(s)	Name of qualification	School or college	State or country
eg.2005-2006	"A" levels	The International School	Singapore

4 Tertiary Education History

Provide details of any tertiary (higher education) studies below.

Year(s)	Name of qualification	School or college	State or country	F/T or P/T	Completed
eg.2006-2009	Bachelor of Arts	University of Sydney	New South Wales	F/T	Yes

What are your major areas of study?

5 English Language Proficiency

Is English your first language? Yes ☐ No ☐

If no, was English the language of instruction in your high school or tertiary education? Yes ☐ No ☐

If you answered NO to both questions, you must provide evidence of your English language proficiency.
Please attach a certified copy of your most recent IELTS or TOEFL test result. The TOEFL institution code for Bond University is 9808.

6 Special Requirements

Students who have a disability and who require Bond University to adjust a process or procedure or wish Bond University to provide equipment or other physical aids, must disclose the nature and extent of the disability to Bond University. As part of the application process students with a disability must contact the University's Disability Support Officer on telephone +61 7 5595 4002 to confidentially discuss their requirements. Please email studyabroad@bond.edu.au to arrange this.

7 Privacy Collection Statement

Bond University ("BU") collects, uses and discloses the personal information required by this form for the purposes of processing your application, facilitating BU's internal business operations, including the fulfilment of any legal and regulatory requirements and providing you with other information about BU and other services that we offer.

If the personal information you provide to BU is incomplete and / or inaccurate, BU may not be able to provide you with the services that you are seeking. You may request access to the personal information BU holds about you in accordance with the BU Privacy Policy.

8 Declaration

I understand that it is my responsibility to provide all documentation requested by the Office of Admissions and authorise BU to obtain, where necessary, any further information from my nominated next of kin and appropriate educational institutions.

I hereby declare that to the best of my knowledge all information submitted or made available to me by BU, whether in relation to any course of study or otherwise, is true, accurate and complete. If any information is considered to be untrue or misleading in any respect, I consent to the collection, storage and disclosure by BU, Universities Australia (UA), or any UA member institution of a record of any such information or any other irregular activity. I understand that any record stored or disclosed according to this system may contain personal details about me from which I may be identifiable.

I understand that BU reserves the right at any stage to withdraw a place which has been offered on the basis of incomplete or incorrect information.

I consent to BU providing information relating to the processing of my application to the agent whose details appear on the front of this form and / or my nominated next of kin.

Signature _____ Date _____

9 What To Do and What Happens Next?

1. You should complete all parts of this form and sign the declaration at the end.
2. Fax or mail the completed form to the address on the front of this application. Applications must be received by:
   - Six week program (June - July) – April 1
   - Four week program (July - August) – May 1
   - Four week program (January) – November 1
3. Places on the program will be limited and will be allocated on a first-come, first-served basis.
4. Once a student accepts a place in the program a deposit of $450AUD will be required. The balance of the program fee is due 30 days prior to the program commencing.

   Students who cancel their admission to the program after the balance of the fees have been paid, will forfeit all tour and accommodation fees and will receive a refund of tuition fees only.

   These penalties may be waived where a student cancels due to serious illness or personal misadventure – as deemed by the Dean of Humanities & Social Sciences. Refunds must be requested in writing with documentary evidence via the Request for Refund form.
5. Once your deposit has been received your place on the program is assured and we will be in touch with more details about planning your studies and tour in Australia.

10 Important Notes

1. We strongly advise all registrants take out personal travel insurance to cover any loss caused to you if illness or other circumstances result in cancellation of your registration.
2. All students are responsible for arranging appropriate travel visas and medical insurance. Advice about this may be sought from the Office of Admissions at the address on the front of this application.
3. Which program do you wish to apply for? (Please tick box)

   4 week program (January) ☐ 6 week program (June – July) ☐ 4 week program (July – August) ☐
4. Do you have a current Australian visa? (Please tick box) Yes ☐ No ☐

   Visa Expiry: ☐☐ Day ☐☐ Month ☐☐ Year

   Year-3 digit code and visa type: ☐☐☐ _____
5. Do you have current Overseas Student Health Cover (OSHC)? (Please tick box) Yes ☐ No ☐

   OSHC Expiry Date: ☐☐ Day ☐☐ Month ☐☐ Year

   Year-OSHC Policy No: _____
6. Do you intend to combine this program with any other Study Abroad program in Australia? (Please tick box) Yes ☐ No ☐

If you have any questions about the program, or about completing this form, please contact:

William Loh, Study Tour Coordinator - wloh@bond.edu.au

bujno.2579