

Office Use Only

Application Number

Course code Receipt number

CRICOS Provider Code 00099F

UTS PACKAGE OFFER 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.

1. COURSE DETAILS

UTS course code UTS course name

When do you wish to begin study at UTS? Autumn Semester (February) Spring Semester (July) Year

2. PERSONAL DETAILS

Your name as shown on your passport

Family name/Surname

Given names

Date of Birth

Day	Month	Year	Male	Female	Indeterminate/ Intersex/ Unspecified
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Sex

Your address in your home country

Postcode/Zip

Phone

Country	Area	Local number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Mobile

Country	Area	Local number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Fax

Country	Area	Local number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Email

You must provide your email address

Your address for correspondence (or UTS representative company stamp)

Postcode/Zip

Phone

Country	Area	Local number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Mobile

Country	Area	Local number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Fax

Country	Area	Local number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Email

You must provide your email address

3. VISA DETAILS

Nationality Country of Birth Country of Permanent Residency Passport Number

4. APPLICATION DETAILS

Have you applied to UTS previously? No Yes UTS application number

Have you ever been offered a place at another Australian University?
No Yes Name of institution Course

5. 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.

6. FINDING OUT ABOUT UTS

How did you find out about UTS? (Please tick)

Education exhibition UTS Representative/Agent Agent's name

Australian embassy Magazine or newspaper

Friends or relatives UTS International

Internet - which internet search engine did you use? Internet search engine name

UTS seminar Other Please specify

7. CHECKLIST

Have you

- | | |
|---|---|
| <input type="checkbox"/> Completed all sections of this application? | <input type="checkbox"/> Enclosed a copy of your eCoE from TAFE NSW? |
| <input type="checkbox"/> Completed the attached credit card details or attached a bankdraft for A\$110 made payable to "University of Technology Sydney"? | <input type="checkbox"/> Enclosed a copy of your letter of offer from TAFE NSW? |

Your application cannot be processed if you do not provide payment and all the completed documentation requested in this checklist.

8. DECLARATION AND SIGNATURE

I declare the following:

- 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;
- I acknowledge that I am applying for a course at TAFE NSW followed by a course at UTS and that any offer of a place at UTS is conditional upon my successful completion of the course at TAFE NSW and meeting the course entry criteria at UTS.
- I have read and understood the UTS Conditional Offer for the specified UTS course that accompanies this TAFE NSW Package Offer Application and agree to be bound by its terms and conditions.
- I agree to be bound by the UTS Student Rules, including without limitation the admission, enrolment and progression requirements for international students as set out at:
www.gsu.uts.edu.au/rules/student-index.html
www.gsu.uts.edu.au/rules/student/section-10.html
- I have accessed sufficient information to understand the entry requirements, structure, content, and standard duration of the UTS course;
- I have read the General Estimate of Annual Costs for International Students attached to the UTS Conditional Offer and understand it is an estimate and costs are subject to changes and increases;
- I have sufficient funds to cover tuition fee payments, living expenses and all other related costs and expenses incurred by me and my dependents during my application to and any enrolment at UTS;
- Neither I, nor any person(s) included (or I intend to include) in my visa application have previously had a visa application, rejected, cancelled or have overstayed their visit in Australia or any other country; and
- I have personally signed this form.

I understand and agree to the following:

- UTS may obtain official records from any institution I have previously attended;
- All documents submitted with this application become the property of UTS;
- I will not be eligible for entry into the UTS course unless I have met all requirements set out in the terms and conditions of the accompanying UTS Conditional Offer. UTS will cancel my eCoE if I fail to meet the requirements of the UTS Conditional Offer and I understand that this may result in the cancellation of my visa by the Department of Immigration & Border Protection (DIBP);
- In order to be admitted to UTS, I must satisfy the Genuine Temporary Entrant (GTE) and Genuine Student (GS) requirements as set by DIBP. For information about the GTE and GS requirements please visit www.border.gov.au/Trav/Stud/More/Genuine-Temporary-Entrant
- I am fully responsible for payment of my tuition fees, living expenses and all other related costs and expenses incurred by me and any dependents during my application to and any enrolment at UTS;
- UTS will not be responsible for any payment of any fees, costs or expenses set out in paragraph [5] above;
- 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;
- If I fail to pay all my tuition fees, UTS will cancel my enrolment;
- 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;
- The personal information collected on this form and during any 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) (ESOS Act) and associated legislation with which UTS must comply;
- While on a student visa I am required to inform UTS of any change to my contact details including changes to residential address, mobile telephone number, or email address within 7 days;
- UTS reserves the right to withdraw an offer of admission and/or cancel my admission or enrolment at any time if UTS is not satisfied that I meet the GTE and GS requirements set by DIBP; if I have provided or cause to be provided, false, inaccurate or misleading information to UTS and/or DIBP; if for any reason I am unable to obtain or maintain a student visa; and/or where UTS considers in its absolute discretion that my admission or enrolment in the course or part of the course would be in breach of, or risks being in breach of any Australian Commonwealth or State legislation. UTS will apply the Refund Protocol as appropriate; For information about the UTS Refund Protocol, go to: www.uts.edu.au/future-students/international/essential-information/fees-information/protocol-fees-refunds
- My student visa may be cancelled by DIBP if I do not maintain enrolment in a Streamlined Visa Processing (SVP) eligible course and/or provider;
- In accordance with the requirements of the National Code under the ESOS Act, if I wish to transfer to another provider during the first 6 months of any course at UTS, I must request a release letter from UTS. The request will be assessed under the UTS Release Protocol which is compliant with the National Code. For information about the UTS Release Protocol go to: www.uts.edu.au/future-students/international/essential-information/fees-information/uts-release-protocol
- I understand and accept that the AU\$110 fee represents a nonrefundable TAFE NSW Packaged Offer administration fee and will not constitute part of my tuition fees.

Student's signature

Date [Day/Month/Year]

Where the student is under 18 years of age

Parent/Guardian co-signature

Date [Day/Month/Year]

WE ADVISE THAT YOU KEEP A COPY OF YOUR PACKAGED OFFER APPLICATION FORM AND ALL ATTACHMENTS FOR YOUR RECORDS

9. PAYMENT OF A\$110 eCoE ADMINISTRATION FEE

Type of credit card (please tick one) Visa Mastercard AMEX

Cardholder's name

Family name(s)

Given name(s)

Card number

Expiry Date

Date (Month/Year)

Signature

Date

Date [Day/Month/Year]

Amount

A\$110.00

SEND APPLICATIONS TO

Email: intadmissions@tafensw.edu.au

Website: www.studyintafe.edu.au

Note

- > Admission to courses at UTS is competitive.
- > This application is not an enrolment form, nor does it guarantee admission.
- > There is no charge for this form.

PLEASE NOTE

CLOSING DATES FOR APPLICATIONS

Autumn (Feb) Semester – 15 December

Spring (July) Semester – 15 June

AN INCOMPLETE APPLICATION WILL DELAY PROCESSING.



PERMISSION TO RELEASE INFORMATION FORM

For packaged offer between TAFE Certificate IV in Nursing and/or Diploma of Nursing with the University of Technology Sydney (UTS) Bachelor of Nursing.

I hereby give consent to TAFE to collect, use and release my personal information to UTS and for UTS to collect, use and release my personal information to relevant TAFE colleges and the Department of Immigration and Border Protection (DIBP), as required to process conditional packaged offers and confirmation of enrolment (CoE).

I authorise UTS to obtain further information with respect to my application from TAFE colleges as necessary.

I declare that I have read and understood the information above.

Applicant

Name:

Signature: Date:

Parent/guardian or person who has legal custody over the applicant if the applicant is Under 18 years old

Name:

Signature: Date:

Please complete and return form to:

Email: intadmissions@tafensw.edu.au

YOUR CORRESPONDENCE ADDRESS

Number and Street Name		Suburb	
		State/Postcode	
Contact Phone Number		Country	

Please enclose this form with your UTS application.

UTS CRICOS Provider Code: 00099F