



**SECTION B: COURSE PREFERENCES**

Please indicate the English Language Course/s you wish to apply for:

5 weeks       10 weeks       20 weeks       25 weeks       30 weeks       40 weeks

Intensive English (5 weeks)      Approximate start date: \_\_\_\_\_

Have you taken an English Proficiency Test within the last 12 months?  Yes  No

If yes, please attach a certified copy of your results, or submit it immediately when available.

Name of Test	Date of Test	Name of Test	Date of Test
IELTS	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <small>Day      Month      Year</small>	TOEFL <input type="checkbox"/> paper-based (Please tick) <input type="checkbox"/> computer-based <input type="checkbox"/> iBT internet-based	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <small>Day      Month      Year</small>
OTHER _____ <small>(Name of test)</small>	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <small>Day      Month      Year</small>		

**SECTION C: APPLICANT'S DECLARATION**

- I declare that the information submitted with this application is true and complete.
- I acknowledge that failure to disclose my academic record may result in the University revoking an offer or terminating my studies at any stage.
- I understand that the University reserves the right to inform other tertiary institutions and regulatory agencies if any of the material presented to support my application is found to be false.
- I understand that at the time of enrolment I will be required to supply originals of all documents used to support this application.
- I acknowledge that the University reserves the right to alter any course, subject, admission requirement or fee without prior notice.
- I understand that the personal information I have provided may be released to government agencies as required by law. I further understand that it may be disclosed to third parties for the purpose of progressing my application.
- I understand that Swinburne collects, uses and destroys my information in accordance with the University's Privacy Policy. For information, see [www.swinburne.edu.au/privacy](http://www.swinburne.edu.au/privacy)

Signature of applicant: \_\_\_\_\_ Date:   /   /    
Day      Month      Year

**SEND APPLICATION TO:**

Swinburne University of Technology      Swinburne International      Telephone: +61 3 8676 7002  
 PO Box 218      Facsimile: +61 3 9818 3648  
 Hawthorn VIC 3122 Australia      Email: [international@swinburne.edu.au](mailto:international@swinburne.edu.au)

PLEASE ENSURE YOU HAVE WRITTEN YOUR EMAIL ADDRESS ON PAGE 1 OF THIS FORM.  
 For further information, including course descriptions, duration, teaching methods, fees payable and entry requirements relating to this course go to: [www.international.swinburne.edu/courses](http://www.international.swinburne.edu/courses)

