

Swinburne University of Technology
Australian Computer Society (ACS)
Professional Year in Computer Science
Application Form

Representative/agent stamp

(if applicable)



SECTION A: PERSONAL DETAILS

If previously enrolled at Swinburne University of Technology, please state ID number

PRINT YOUR NAME AS IT APPEARS IN YOUR PASSPORT. Please use BLOCK CAPITALS. All fields must be completed

Contact details

Title: _____ (Mrs, Miss, Ms, Mr etc) Gender: Female Male

Family name

Given names

Date of birth / /

Email address

Telephone number Mobile telephone

Postal address

Number and street

Suburb/City

State

Country Postcode

Residential address (if different to Postal Address)

Residential address should NOT be the same as your agent

Number and street

Suburb/City

State

Country Postcode

Citizenship

Country of citizenship: Country of birth:

Do you hold a current Skilled-Graduate (temporary) visa (Subclass 485)? Yes No

If **YES**, complete below

485 Visa number:

485 Visa expiry date: / /

If **NO**, have you applied for a 485 visa? Yes No

If **YES**, please attach a copy of your application and state application reference number

If **NO**, please detail your present state:

Disability

Note: this is for support purposes only and will not affect the outcome of your application

Do you have disability? Yes No If yes, please provide details:

SECTION B: COURSE PREFERENCES

Program	Campus	Intake	Year
Australian Computer Society (ACS) Professional Year in Computer Science	Prahran		

SECTION C: ENGLISH LANGUAGE PROFICIENCY

IELTS Score Yes No Listening Reading Writing Speaking Overall

Date of test: , ,

If **NO**, please detail other English Language Proficiency

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SECTION D: EDUCATION DETAILS

Tertiary studies completed or undertaken in Australia

Month/Year Commenced	Month/Year Completed	Title of Course (eg Bachelor of Business)	Name of Institution	Full-time or Part-time	Completed Yes / No

SECTION E: EMPLOYMENT HISTORY

Complete the following employment history and provide employment references or attach your curriculum vitae (resumé). Write NIL if no employment history.

Period	Employer	Department/Section	Nature of Work

SECTION F: CHECKLIST AND DECLARATION

Make sure the following are attached:

- Certified academic transcripts with grading system
- Curriculum vitae
- Certified English proficiency test results
- 485 Visa or confirmation of application
- Passport copy
- Australian Computer Society Skills Assessment. Reference no:

Applicant's declaration

- I declare that the information submitted with this application is true and complete. I further declare that any tertiary academic results submitted are a complete record of all results I have obtained from every tertiary institution I have attended.
- 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 authorise the University to seek verification of my academic and professional qualifications, and work experience. 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.
- I have read and understood the policy and conditions on www.swinburne.edu.au/professionalyear to government agencies as required by law. I authorise the University to disclose information relevant to my application and enrolment to third parties for the purpose of progressing my application and enrolment and administering my program. I also authorise the University to release information about me and my enrolment, including my photograph to the Australian Computer Society.

Signature of applicant: Date: , ,

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: pyp@swinburne.edu.au

PLEASE ENSURE YOU HAVE WRITTEN YOUR EMAIL ADDRESS ON PAGE 1 OF THIS FORM.