

Please use BLOCK/CAPITAL letters, indicate with "N/A" where questions are not applicable and tick boxes where appropriate.

APPLICATION PROCESS

- > The University of Notre Dame Australia welcomes applications from students who wish to spend one or two semesters of Study Abroad at our university.
- > Notre Dame Australia will consider applications from students who have applied through and been recommended by their own university's study abroad / international office, as well as students applying independently from non-partner universities.
- > As part of this process, students are required to complete the following application form and after approval from their own university (if applicable) send them to **Study Abroad Office fremantle.studyabroad@nd.edu.au**

1. COMMENCEMENT DATE AND CAMPUS

1.1 Home university

1.2 Indicate which semester you wish to commence study at Notre Dame Australia.

 Semester 1, February to June Year Semester 2, July to November Year

1.3 Indicate which campus you wish to commence study at Notre Dame Australia.

 Fremantle On-Campus accommodation (subject to availability)
 Sydney (please note residential accommodation is not part of the Study Abroad Program)
2. PERSONAL INFORMATION (as on passport)

2.1 Title	Family name	Given name	Middle names
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Preferred first name		Date of birth	
<input type="text"/>		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female			

3. CONTACT DETAILS (The address where you can be contacted most times)

3.1 Number and street	Town/Suburb/City
<input type="text"/>	<input type="text"/>
State <input type="text"/>	Country <input type="text"/>
Zip code <input type="text"/>	
Country area code <input type="text"/>	Home telephone <input type="text"/>
Country area code <input type="text"/>	Other telephone <input type="text"/>
Email <input type="text"/>	

4. PASSPORT DETAILS

4.1 Passport number	Expiry date	Nationality
<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
Country of birth <input type="text"/>	Country of citizenship <input type="text"/>	

5. CONTACT PERSON (I authorise the University to contact this person in case of emergency)

5.1 Title	Family name	Given name	Middle names
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Relationship to you <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Brother <input type="checkbox"/> Sister <input type="checkbox"/> Friend			
Number and street		Town/Suburb/City	
<input type="text"/>		<input type="text"/>	
State <input type="text"/>	Country <input type="text"/>	Zip code <input type="text"/>	
Country area code <input type="text"/>	Home telephone <input type="text"/>	Country area code <input type="text"/>	Other telephone <input type="text"/>
Email <input type="text"/>			

6. ACADEMIC RECORD

- 6.1 Major
- 6.2 Minor/Second Major
- 6.3 University Country

PLEASE ATTACH YOUR **CURRENT ACADEMIC TRANSCRIPT** WHICH INCLUDES A STATEMENT OF YOUR CURRENT ENROLMENT.

7. ENGLISH PROFICIENCY (Students whose first language is not English)

- 7.1 For further information on minimum proficiency requirements please go to notredame.edu.au/study/admission-requirements/english-language-proficiency-requirements
Please contact the **Study Abroad Office** to discuss requirements for your individual program of study.

8. PERSONAL STATEMENT

On a separate sheet describe why you have selected this program and what you wish to achieve by applying for this opportunity to Study Abroad at The University of Notre Dame Australia. Use this as an opportunity to introduce yourself and to discuss your personal and academic goals and qualifications which influenced your decision to apply to participate in this program. Include any contributions that you think you will be able to make to the program.

9. SPECIAL INTERESTS

- 9.1 Please describe any involvement in community service or church activities.

- 9.2 Please describe any part-time or vacation employment.

- 9.3 Please describe any leadership positions you have held and/or any involvement with clubs or student societies at your home university.

- 9.4 Please list any sports in which you participate

- 9.5 Please list any special activities you would like to participate in during your semester abroad in addition to your studies.

10. RECOMMENDATIONS (for independent applicants only)

Using the attached forms, please provide two recommendations from someone who knows you well and recently - either a faculty member who has taught you, your academic advisor, a residential supervisor or other professional person.

These forms can be included with this application or scanned to:

The University of Notre Dame Australia, Study Abroad Office
Email: fremantle.studyabroad@nd.edu.au

11. DOCUMENTATION CHECKLIST

Please tick this checklist to ensure that your application is complete before signing and dating the declaration and submitting your application. **ONLY APPLICATIONS WITH ALL REQUIRED DOCUMENTS ATTACHED WILL BE PROCESSED.** Please note that submitted documents will not be returned.

I have:

- read and understood the sections of this application relating to the programs I have selected, application procedures and Refund Policy.
- completed all sections of this application form. Incomplete applications cannot be processed.
- attached a personal statement of approximately 300 words in length.
- attached photocopy of passport.
- attached certified/notarised transcripts and certificate of completion (together with certified/notarised English translations) of all academic studies undertaken (including studies not completed).
- attached certified/notarised documentary evidence of English language proficiency i.e. Academic IELTS.
- attached two letter of recommendation (independent applicants only, not required for partner university applicants).
- attached one passport size photos with name printed on the back.
- attached an official statement of current enrolment.
- attached a completed Study Abroad Medical Report Form.
- signed and dated the declaration.

12. APPLICANT'S DECLARATION (You must sign and date this section)

I declare that to the best of my knowledge the information I have supplied in this application and the documentation supporting it is correct and complete. I understand that the provision of incorrect information or documentation or the withholding of relevant information or documentation relating to this application may result in the cancellation of my enrolment at, or an offer of enrolment by, The University of Notre Dame Australia. I have read and understood the sections of this form relating to the programs I have selected, application procedures, fees, overseas student health cover and refund policy. I undertake to make timely payments of any fees or associated costs for which I am liable. I am aware of the likely costs of my stay in Australia and have the necessary financial capacity to meet such costs for the duration of my program.

Applicant's signature

Date (dd/mm/yyyy)

13. HOW TO APPLY**Applicants from partner universities**

Completed application forms, together with transcripts and all requested documentation should be submitted to your university's Study Abroad / International Office.

Independent applicants

Completed application forms, together with transcripts and all requested documentation should be submitted to:

The Study Abroad Office

fremantle.studyabroad@nd.edu.au

14. CONDITIONS OF ENROLMENT

1. Tuition fees and overseas student health cover (OSHC) will be invoiced according to contracted arrangements that Notre Dame has with your home university or agent. If students are required to pay before arrival, they will be invoiced accordingly and payment must be made as shown on the invoice, approximately 6 weeks prior to commencement date of the program.
2. On receipt of your signed acceptance the University issues an electronic Confirmation of Enrolment (CoE) letter. You can apply for your student visa online on www.homeaffairs.gov.au or take the CoE to an Australian Embassy or High Commission to apply for a student visa.
3. The University reserves the right to change its fees and conditions at any time.
4. Study Abroad and Exchange students living off campus must inform the University of any change of address within several days of such change.

15. GENERAL INFORMATION

› Enrolment and Orientation

All new students are required to attend Enrolment and Orientation sessions, which are held during the week prior to the commencement of each semester. Final details will be provided to new students closer to semester commencement date.

› Refund Policy for International Students

notredame.edu.au/about/policies/student-policies

In all cases, refunds of tuition and accommodation fees will be in accordance with any State authorities and the Commonwealth's Education Services for Overseas Students Act 2000 (ESOS). Information on the ESOS framework is available at internationaleducation.gov.au

This agreement does not remove the right to take further action under Australia's consumer protection laws. In the case of any disputes, The University of Notre Dame Australia's Dispute Resolution processes do not circumscribe the student's right to pursue other legal remedies.

› Privacy Declaration

The information provided in this form will only be used for the administrative or educational purposes of the University, or in accordance with your specific consent. The University will not disclose your personal information to a third party unless required or permitted by law or where you have consented to the disclosure. Information relating to how the University collects, uses or discloses your personal information and how you may complain about the University's handling of your personal information is contained in the University's Privacy Policy at notredame.edu.au/about/policies/student-policies.

The University may disclose your personal information to the Australian Government or to other authorised agencies if required to do so under legislation. You have a right to access your personal information that the University holds and to seek its correction. If you wish to access your personal information or inquire about the handling of your personal information, please contact the relevant Campus Registrar via email: Fremantle students, Fremantle.Registrar@nd.edu.au or Sydney students, Sydney.Registrar@nd.edu.au

› Medical Insurance: Overseas Student Health Cover (OSHC)

It is a requirement of the Department of Home Affairs that Holders of student visas have OSHC. For Study Abroad and Exchange students, this cover is arranged by the University as part of the admissions process and fees payable are invoiced according to contractual arrangements that Notre Dame has with your university. Full information, including how to claim a refund of medical expenses from the health cover provider, is provided during Orientation by OSHC Bupa Advantage, the University's OSHC provider.

Payment options see also conditions of Enrolment.

For students who are required to pay certain fees before arrival, they will be invoiced accordingly.

Please quote your full name and tax invoice number as reference in all correspondence with the University. Payment can be made in the following ways:

1. If payment is made by International Telegraphic Transfer, please email a copy of the receipt and payment details to: fremantle.studyabroad@nd.edu.au

2. By Direct Deposit to:

Account Name: The University of Notre Dame Australia

Account Number: 61700 0078

BSB: 086-217

Swift code: NATA AU 3306P

Bank: National Australia Bank (2 Queen Street, Fremantle, WA, 6160, Australia)

All payments must be made in Australian dollars and students are responsible for paying all bank charges.

For further information, please contact The University of Notre Dame Australia, Study Abroad Office.

Disclaimer: The information contained in this document was correct at the time of publication but the University reserves the right to make subsequent changes.



Study Abroad Letter of Recommendation

(independent applicants only)

Letter One

PART TWO

Please use BLOCK/CAPITAL letters, indicate with "N/A" where questions are not applicable and tick boxes where appropriate.

STUDENT

Please request your referee complete the information below then submit with your application.

STUDENT NAME

Title	Family name	Given name	Middle names
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Name of the person writing the letter of recommendation

Capacity in which this person has known the applicant

Length of time this person has known the applicant

Applicant's signature

Date (dd/mm/yyyy)

REFEREE

Introduction: The student presenting you with this form is applying for a Study Abroad Program sponsored by The University of Notre Dame Australia. Many factors are considered in the selection and approval of the applicants for study abroad. As one familiar with the academic and personal characteristics of the applicant, you are asked to assist us in the selection by your candid appraisal of the candidate's qualifications.

1. How would you rate this student as a candidate for a one semester Study Abroad Program in Australia.

- Very suitable
 Suitable
 Not suitable

2. Please complete the following table by ticking the appropriate box below:

In comparison to the other Students I work with, this student demonstrates	Truly excels In this area	Is better than most students	Is somewhat better than average	Typical of students I know	Is somewhat weaker than average	Is weaker than most students
Ability to adapt to a new environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to accept personal responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to make new friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interest in and tolerance of new ideas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work with persons in authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General self-discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sensitivity to the needs/rights of others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall maturity and judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Please add any relevant comments about this applicant.

Referee's signature

Date (dd/mm/yyyy)

Study Abroad Letter of Recommendation

(independent applicants only)

Letter Two

PART TWO

Please use BLOCK/CAPITAL letters, indicate with "N/A" where questions are not applicable and tick boxes where appropriate.

STUDENT

Please request your referee complete the information below then submit with your application.

STUDENT NAME

Title	Family name	Given name	Middle names
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Name of the person writing the letter of recommendation

Capacity in which this person has known the applicant

Length of time this person has known the applicant

Applicant's signature

Date (dd/mm/yyyy)

REFEREE

Introduction: The student presenting you with this form is applying for a Study Abroad Program sponsored by The University of Notre Dame Australia. Many factors are considered in the selection and approval of the applicants for study abroad. As one familiar with the academic and personal characteristics of the applicant, you are asked to assist us in the selection by your candid appraisal of the candidate's qualifications.

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Ability to accept personal responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to make new friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interest in and tolerance of new ideas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work with persons in authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General self-discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sensitivity to the needs/rights of others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall maturity and judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Please add any relevant comments about this applicant.

Referee's signature

Date (dd/mm/yyyy)

Please use BLOCK/CAPITAL letters, indicate with "N/A" where questions are not applicable and tick boxes where appropriate.

The purpose of this form is to determine your health history and any special medical needs you may have when you study abroad. Information provided will be treated confidentially. A copy of this form will be given to the Notre Dame Australia Study Abroad Office for the purpose of serving you as promptly and correctly as possible, should you require medical or counselling services during your term abroad.

TO BE COMPLETED BY APPLICANT

Title	Family name	Given name	Middle names
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Name of Primary Physician Clinic

Are you generally in good physical condition? Yes No

Are you currently being treated for any physical condition? Yes No

Do you have a heart condition? Yes No

Are you a diabetic? Yes No

Do you have asthma? Yes No

Do you have, or have you had, any eating disorders? Yes No

What diseases have you had in the past five years (if any)? Please list

Have you ever been treated for an emotional disorder? Yes No

Do you have any allergies to foods, medications, environmental factors, insects, etc? Yes No

If yes, please list

Are you taking any medications? Yes No

If yes, please list

Are you on a restricted diet (vegetarian, diabetic, allergies)? Yes No

If yes, please list

Do you anticipate needing any health care or counselling while abroad? Yes No

COMMENTS/EXPLANATION FROM THE FRONT OF THIS FORM

If there is any additional health information that you feel it would be helpful for the University to be aware of during your study abroad experience, then please provide details below.

MEDICAL INSURANCE

It is a requirement of the Australian Government that all overseas students have Overseas Student Health Cover. Insurance with BUPA is arranged on your behalf by The University of Notre Dame Australia.

In addition, Study Abroad students are strongly recommended to retain their own medical insurance policy while they are abroad.

I am insured for any medical expenses, including evacuation back to home country, which I may incur while I participate in the Program.

This policy is with

Insurance company

Policy number

Number & street

Town/Suburb/City

State

Country

Zip code

I, certify that all responses made on this Medical Report form are true and accurate, and I will notify The University of Notre Dame Australia representatives hereafter of any relevant changes in my health that occur prior to the start of the program. I understand that this form is for information purposes only and in no way implies that The University of Notre Dame Australia takes responsibility for my health.

Applicant's signature

Date (dd/mm/yyyy)

Privacy Declaration The information provided in this form will only be used for the administrative or educational purposes of the University, or in accordance with your specific consent. The University will not disclose your personal information to a third party unless required or permitted by law or where you have consented to the disclosure. Information relating to how the University collects, uses or discloses your personal information and how you may complain about the University's handling of your personal information is contained in the University's Privacy Policy at notredame.edu.au/about/policies/student-policies.

The University may disclose your personal information to the Australian Government or to other authorised agencies if required to do so under legislation. You have a right to access your personal information that the University holds and to seek its correction. If you wish to access your personal information or inquire about the handling of your personal information, please contact the relevant Campus Registrar via email **Fremantle students - Fremantle.Registrar@nd.edu.au** or **Sydney students - Sydney.Registrar@nd.edu.au**.