



**APPLICATION for ADMISSION**

Please complete this application form,  
 include a passport photograph and the required attachments,  
 and send to:

**Research Director  
 Sydney College of Divinity  
 PO Box 1882  
 Macquarie Centre NSW 2113**

**Personal Details**

Title: \_\_\_\_\_

Family Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Preferred: \_\_\_\_\_

Second Name: \_\_\_\_\_

Marital Status:

Married\*     Single     Other

\*Previous Family name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender:                     Female  Male

Home phone: (h) \_\_\_\_\_

Work phone: (w) \_\_\_\_\_

Mobile: \_\_\_\_\_

Fax: (h) \_\_\_\_\_ (w) \_\_\_\_\_

Email: \_\_\_\_\_

Term Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ Postcode: \_\_\_\_\_

Postal Address: \_\_\_\_\_  
 \_\_\_\_\_ Postcode: \_\_\_\_\_

Permanent Home Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ Postcode: \_\_\_\_\_

**Personal Details (continued)**

Are you of Aboriginal and / or Torres Strait Islander origin?

No                                     Yes, Aboriginal  
 Yes, Torres Strait

Country of Birth: \_\_\_\_\_

If born overseas, year of arrival: \_\_\_\_\_

Citizenship: \_\_\_\_\_

**Please provide original or certified copy of  
 Birth Certificate or Passport.**

If you are not an Australian citizen, are you a Permanent  
 Australian Resident?

No     Yes

**If Yes, you must provide evidence of Residency.**

Do you speak a language other than English at home:

No  Yes

If Yes, which language? \_\_\_\_\_

Do you have a disability, impairment or long term medical  
 condition which may affect your studies?

No     Yes

If Yes, please indicate.

Hearing                     Learning                     Mobility  
 Vision                     Medical                     Other \_\_\_\_\_

Would you like to receive advice on support services,  
 equipment and facilities which may assist you?

No     Yes

## Previous Education

### Secondary Level

*Please include copy of academic record or award*

School attended: \_\_\_\_\_

State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Year 12 completed:  No  Yes

Year that you left school: \_\_\_\_\_

ATAR/UAI/TER/OP (circle appropriate index) Score : \_\_\_\_\_

Name of the town/suburb where you lived in your last year of secondary school:

Town/Suburb \_\_\_\_\_ Postcode: \_\_\_\_\_

*If an Overseas student -*

Country of Studies: \_\_\_\_\_

Language of Studies: \_\_\_\_\_

### Tertiary Level (or other relevant studies)

*Please include copies of academic transcripts*

*Institution 1:* \_\_\_\_\_

Course Name: \_\_\_\_\_

Year award granted: \_\_\_\_\_

CHESSN: \_\_\_\_\_

If incomplete, year withdrew: \_\_\_\_\_

If incomplete, indicate proportion completed: \_\_\_\_\_

*Institution 2:* \_\_\_\_\_

Course Name: \_\_\_\_\_

Year award granted: \_\_\_\_\_

CHESSN: \_\_\_\_\_

If incomplete, year withdrew: \_\_\_\_\_

If incomplete, indicate proportion completed: \_\_\_\_\_

*Institution 3:* \_\_\_\_\_

Course Name: \_\_\_\_\_

Year award granted: \_\_\_\_\_

CHESSN: \_\_\_\_\_

If incomplete, year withdrew: \_\_\_\_\_

If incomplete, indicate proportion completed: \_\_\_\_\_

Are you currently studying elsewhere?

No  Yes

If Yes, complete the following:

Institution: \_\_\_\_\_

Course Name: \_\_\_\_\_

Part-time  Full-time

## Courses

Please indicate which course you are seeking admission into:

Master of Philosophy

Doctor of Ministry

Doctor of Philosophy

Doctor of Theology

Have you previously been admitted into a Member Institution of the Sydney College of Divinity?

No  Yes

If Yes, where and when? \_\_\_\_\_

When do you wish to begin study?

(e.g. Semester / Trimester 1, 2011) \_\_\_\_\_

## Course Admission

On what basis are you seeking admission?

- Higher School Certificate or equivalent \*copy of transcript
- Secondary Education\*, TAFE or equivalent \*copy of transcript
- Higher Education course\* (e.g. Degree) \*copy of transcript
- Professional Qualification\* evidence required
- Mature age \* copy of passport or birth certificate
- Special entry \* evidence required

Are you intending to study:

Part-time  Full-time

## Credit for Previous Study

Would you like to apply for credit for previous study?

Yes  No

**If Yes, please include a certified transcript of previous study**

## English Proficiency

Is English your first language?  No  Yes

(If English is not your first language, you may be required to complete an IELTS test)

If you have completed an English test-

Name of English Language Test Completed: \_\_\_\_\_

Test Date: \_\_\_\_\_ Test Score: \_\_\_\_\_

**Please include a copy of the Test Results.**

## Education Level of your Parents or Guardians

The Department of Education and Training (DET) requires this information to be collected for statistical purposes. It will not be used by the Sydney College of Divinity or its Member Institutions in the assessment of your application for admission.

### Parent / Guardian 1

Male  Female  No parent/guardian

What is the highest level of education completed by your parent/guardian 1?

- Postgraduate qualification (e.g. GradDip, Master's, Doctorate)  
 Bachelor degree  
 Other post-school qualification (e.g. Assoc. Degree, Diploma, Adv. Diploma, completed apprenticeship, VET/TAFE Certificate)  
 Completed Year 12 schooling\*  
 Completed Year 10 schooling, continued, but not Year 12  
 Completed Year 10 schooling\*  
 Didn't complete Year 10 schooling  
 Don't know

\* or equivalent

### Parent / Guardian 2

Male  Female  No parent/guardian

What is the highest level of education completed by your parent/guardian 2?

- Postgraduate qualification (e.g. GradDip, Masters, Doctorate)  
 Bachelor degree  
 Other post-school qualification (e.g. Assoc. Degree, Diploma, Adv. Diploma, completed apprenticeship, VET/TAFE Certificate)  
 Completed Year 12 schooling\*  
 Completed Year 10 schooling, continued, but not Year 12  
 Completed Year 10 schooling\*  
 Didn't complete Year 10 schooling  
 Don't know

\* or equivalent

## Next of Kin

Name of Next of Kin: \_\_\_\_\_

Address of Next of Kin: \_\_\_\_\_  
\_\_\_\_\_

Postcode: \_\_\_\_\_

Country: \_\_\_\_\_

Phone: \_\_\_\_\_

## Financial Information

Tuition fees are required before each semester / trimester begins

How do you plan to pay for your study?  
(more than one box can be ticked)

- Cash/Cheque  
 Credit Card –  Mastercard  Visa  
 Bank Transfer  
 Fee Help – A loan provided by the Government.  
This can be for all or part of your fees.  
 Other: \_\_\_\_\_

Are you a Pensioner?  No  Yes

If Yes, please supply evidence for administration purposes

## Marketing Information

Why have you chosen to study with this College?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How did you discover this College?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Web  Student  Staff  
 Exhibition etc.  Church  Advertising

## Application Checklist

- Birth Certificate or Passport  
 Passport size photograph  
 Evidence of residency (if required)  
 Academic Transcripts – secondary and / or tertiary  
 Academic Transcripts – seeking credit for previous study  
 Fee Help Application (if applying for Fee Help)  
 Evidence of being a Pensioner (if required)  
 IELTS Test Results (if required)  
Other \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Withdrawal and Refund

Students may withdraw from courses without academic penalty only if notice of withdrawal is submitted in writing to the Registrar by 4.00 pm on the Census Date applicable to the subject in question.

If withdrawal occurs up to 4.00 pm on the Census date the tuition fee will be refunded but a withdrawal penalty will be charged to the student and is payable immediately. Beyond this time, tuition fees will not be refunded. See the Sydney College of Divinity Refund Policy for further details.

I understand and accept the Withdrawal and Refund arrangements of the Sydney College of Divinity.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_

## Privacy Legislation

Sydney College of Divinity requires the information requested of you in this form in order to provide you with education services and to cater for particular students' needs. If you do not provide all the relevant information, we may not be able to provide such services and to assess your academic progress.

Please also note that the Sydney College of Divinity may provide your personal information and sensitive information to third parties (e.g. educational institutions such as universities, colleges and accreditation bodies and Australian government bodies such as DET, Centrelink and the Department of Immigration and Border Protection, Tuition Protection Scheme, ESOS Assurance Fund Manager, Social Research Centre,) in order to provide you with high quality education services and assess your academic progress or suitability.

You can request access to your health and personal information by contacting the Privacy Officer.

I understand and accept the privacy legislation.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_

## Declaration

I wish to be considered for entry into the program that I have nominated. I declare that the information that I have provided herein is true and accurate to the best of my knowledge.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_

## OFFICE USE ONLY

Date App. Rec'd: Application Complete?	Credit Application: Y / N
Approved by: Date Approved MI:	Credit Offered: (EFTSL)      Credit Used: (EFTSL) Date Credit Approved by SAC: (1.0 EFTSL = 72 credit points)
Formal Accept. Sent::	Source of Credit: HE / VET / HE & VET / Study outside Aus. / Work Experience outside Aus
Date Approved SCD:	If H.E., Provider Name:
Fee Help? Y / N	If VET, Type of Provider: Uni / Other H.E. Provider / TAFE / High School or Aust. Tech. College / Other VET Provider
Entered into Edupoint:	Field of Education: Religious Studies / Philosophy / Counselling Psychology / Phil. & Rel. Stud. / Other: _____ Level of Education: Cert I / Cert II / Cert III / Cert IV / Dip / Adv Dip / Grad Cert / Grad Dip
<b>SCD Student No:</b>	<b>CHEESN:</b>