



You must complete all sections of this document and submit it with your application to Deakin University.

Personal Detail	
Family Name	
Given Name	
StudyLink Application ID	

1. Reason for undertaking your selected course of study:

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2. Reason for choosing Deakin University:

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3. Reason for choosing to study in Australia rather than your home country:

4. Relevance of your selected course of study to your previous education/employment history:

5. How will you benefit from studying your chosen course?



6. Do you have gap in education which is more than 6 months? Yes No (please circle one)

6a. Please explain the reason or purpose for the gap (if you have a gap which is more than 6 months)

7. Will you bring your spouse or/and dependants with you to Australia?

Yes

No

Unsure this time (please circle one)

7a. Will your spouse and/or dependents be included in your student visa application?

Yes

No (please circle one)



8. Do you have relatives residing in Australia? Yes No (please circle one)

8a. Please provide contact details for your relatives in Australia, including their full name, city, state, relationship and occupation

9. Do you have any other relevant information or documentation that you'd like to provide?



APPLICANT DECLARATION

- I declare that I have sufficient funds to support my education and the relevant expenses for the full duration of my studies at Deakin University.
- I declare that I am not dependent on part time work to support my expenses while in Australia.
- I declare that if my partner/spouse is accompanying me to Australia that he/she is not dependent on working in Australia to take care of the tuition fees and living expenses.
- I am aware that the university will not waive the tuition fees or assist with the study expense and cost of living if I am unable to fund my stay in Australia.
- I am also aware that the university reserves the right to cancel my enrolment due to non-payment of tuition fees.
- The course that I have selected to study at Deakin University is fully aligned to my career aspirations.
- I understand that the university reserves the right to refuse a transfer request to another institution within the first six months of my principal course.
- I declare that I have submitted all genuine documents to the university.
- I understand that the visa will be cancelled or rejected if I do not meet the health and character checks.

By signing this I declare that all information is true and correct to the best of my knowledge.

Full Name

Signature

Date (DD/MM/YYYY)

___/___/____