

# Application for Admission to a Postgraduate Coursework Program (Graduate Certificate, Postgraduate Diploma, Graduate Diploma, Masters)

## Applicants – Please Note:

1. This form is an application for Admission ONLY; Applicants must complete ALL sections.
2. **This form is to be used by Domestic Students only. International Students please refer to webpage: <http://www.latrobe.edu.au/international>**
3. Applicants will receive a letter detailing the outcome of this application.
4. **Certified copies\*** of supporting documentation **MUST** be attached with this application. Failure to provide supporting documentation may delay or prevent your application being considered. Do not send original documents as they cannot be returned to you. Examples of appropriate documentation include certified Academic Records for previous studies, Birth Certificates etc.
5. If you have previously undertaken a course or units (subjects) at La Trobe University, you are not required to attach an academic transcript from La Trobe University with this application. Only submit relevant academic transcripts from other institutions, where applicable.
6. Applications for Admission must be sent to the **Faculty** in which you wish to study.
7. Applicants wishing to submit more than one application must complete a separate application for each course.
8. Applicants are strongly advised to check their eligibility to access HECS-HELP or FEE-HELP, if appropriate, at the "Going to Uni" website at [www.goingtouni.gov.au](http://www.goingtouni.gov.au) prior to submitting their application.

\*A certified copy is a photocopy that has been certified to be a true copy of the original by an appropriate person such as a Justice of the Peace, Public Notary, member of the Police Force, Dentist, Pharmacist, Minister of Religion, Medical Practitioner, Solicitor, School Principal or Bank Manager.

Return the completed application form to the appropriate Faculty office or Regional Campus. You can find closing dates for individual courses on La Trobe's CourseFinder database: [www.latrobe.edu.au/coursefinder](http://www.latrobe.edu.au/coursefinder) or by contacting the relevant Faculty, School or Division.

### Bundoora Campus

#### Faculty of Education

Admissions Officer  
Faculty of Education  
La Trobe University  
Bundoora Victoria 3086

#### Faculty of Health Sciences

Admissions Officer  
Faculty of Health Sciences  
La Trobe University  
Bundoora Victoria 3086

#### Faculty of Humanities & Social Sciences

Admissions Officer  
Faculty of Humanities & Social Sciences  
La Trobe University  
Bundoora Victoria 3086

#### Faculty of Law & Management

Admissions Officer  
Faculty of Law & Management  
La Trobe University  
Bundoora Victoria 3086

#### Faculty of Science, Technology & Engineering

Admissions Officer  
Faculty of Science, Technology & Engineering  
La Trobe University  
Bundoora Victoria 3086

### Regional Campuses

#### Albury-Wodonga Campus

Admissions Officer  
Student Administration Office  
La Trobe University  
PO Box 821  
Wodonga Vic 3689

#### Bendigo Campus

Admissions Officer  
Student Administration Office  
La Trobe University  
PO Box 199  
Bendigo Vic 3552

#### Mildura Campus

Admissions Officer  
Student Administration Office  
La Trobe University  
PO Box 4095  
Mildura Vic 3502

#### Shepparton Campus

Admissions Officer  
Student Administration Office  
La Trobe University  
PO Box 6044  
Shepparton Vic 3632

## SECTION 1: PERSONAL DETAILS

Have you previously been enrolled at La Trobe University?  Yes  No

Are you currently enrolled in another La Trobe University course?  Yes  No

If yes, under what name was this enrolment?

Student ID Number:

If your name has changed since prior study, please provide your previous name and attach certified copies of documentation regarding the change.

Family Name: \_\_\_\_\_ Title: (Mr, Ms, Miss, Mrs, Dr) Date of Birth: / /

Given Names: \_\_\_\_\_ Gender:  Male  Female

Address for correspondence

Number and Street:

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

Telephone (Business/Mobile): \_\_\_\_\_ Telephone (Home): \_\_\_\_\_

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

## SECTION 2: COURSE INFORMATION

Please refer to the University website; [www.latrobe.edu.au/coursefinder](http://www.latrobe.edu.au/coursefinder) for correct course titles.

Name of course to which you are applying: \_\_\_\_\_ Course Code: \_\_\_\_\_

Faculty: \_\_\_\_\_ Campus: \_\_\_\_\_

Proposed intake year:     Semester 1  Semester 2

Mode:  Full-time  Part-time Other admission period, if applicable (refer to course guide):

### Student applying for a course in the Faculty of Humanities and Social Sciences ONLY:

Would you like to apply for a CSP (Commonwealth Supported Place) (if eligible)? Yes  No

### SECTION 3: EDUCATIONAL QUALIFICATIONS

a) What was your highest year level attempted (i.e. Year 10, 11, 12 Form 5, 6):

What was your ENTER or equivalent:

Did you complete Year 12?  Yes  No

If Yes, in what year did you complete Year 12?

b) List all courses in which you have been enrolled at post-secondary and/or tertiary institutions, including incomplete degrees. Attach original or certified transcripts for each course, including incomplete courses. Please include any continuing educational courses and/or subjects completed, and if relevant to your application, attach documentary evidence of attendance/ completion.

| Abbreviated Title of Qualification | Student ID Number | Awarding Institution | Period of Enrolment | Completed? |
|------------------------------------|-------------------|----------------------|---------------------|------------|
| Example: BA                        | 888888888         | La Trobe University  | 2004 – 2006         | Yes        |
|                                    |                   |                      |                     |            |
|                                    |                   |                      |                     |            |
|                                    |                   |                      |                     |            |
|                                    |                   |                      |                     |            |
|                                    |                   |                      |                     |            |

If no, please enter one of the following codes:

**WIL**  
(will complete before admission)

**DIS**  
(discontinued)

**ATT**  
(attempted)

### SECTION 4: POST EDUCATIONAL STATISTICS

a) Are you of Aboriginal or Torres Strait Islander Descent?

Are you of Aboriginal Descent?  Yes  No

Are you of Torres Strait Descent?  Yes  No

b) Please select the citizenship/residency status that applies to you

Australian Citizen  New Zealand Citizen

Permanent Humanitarian Visa (you will be required to provide evidence of permanent humanitarian visa)

Permanent Resident Status Date you obtained Permanent Resident Status / /

Temporary Entry Permit (please note if you are the holder of a temporary visa you must apply as an International Student. Please contact La Trobe International for further information. La Trobe International: Phone (03) 9479 1199; Email: [International@latrobe.edu.au](mailto:International@latrobe.edu.au); webpage: [www.latrobe.edu.au/international](http://www.latrobe.edu.au/international))

Other (please specify)

c) Residence

Permanent home residence postcode:     If residence is overseas, state country:

Semester residence postcode:     If residence is overseas, state country:

Year 12 residence suburb postcode:     If Year 12 residence is overseas, state country:

Country of Birth: If born overseas, indicate year of arrival in Australia:

Language spoken at permanent residence:

d) What is your highest level of educational participation prior to commencement of this course?

**02** Completed Higher Educational postgraduate level course completion year

**03** Completed Higher Educational Bachelor level course completion year

**04** Completed Higher Education sub-degree level course completion year

**05** Have started but not completed Higher Education course last year of participation

**07** Completed final year of secondary education course at school or TAFE completion year

**08** Completed other qualification or certificate of attainment or competence – complete or incomplete completion year

**09** No prior educational attainment

**10** Completed Vocational & Technical Education course (e.g. TAFE) completion year

**11** Have started but not completed a Vocational & Technical Education course (e.g. TAFE) last year of participation

## SECTION 5: EMPLOYMENT/WORK EXPERIENCE DETAILS

|   |   |
|---|---|
| Present occupation:   | Employment duration:  |
| Employer details (please provide information for your most recent employer/s):          |   |
| <b>Employer 1</b> <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time | <b>Employer 2</b> <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time |
| Name:   | Name:   |
| Title/Position:   | Title/Position:   |
| Postal Address:   | Postal Address:   |
| Telephone:  | Telephone:  |
| Email:  | Email:  |

Please provide details on a separate page regarding other employment history (since leaving school) you regard as relevant; this may include unpaid or volunteer work relevant to your chosen course.

## SECTION 6: SUPPLEMENTARY INFORMATION/REFERENCES

Please note the following courses require referee reports and/or other supplementary information, as listed.

### Faculty of Health Sciences

- Applicants to all Nursing and Midwifery course please go to [www.latrobe.edu.au/nursing](http://www.latrobe.edu.au/nursing) for a Supplementary Information Form.
- Applicants to the Master of Occupational Health and Master of Occupational Therapy (mode 2 only) MUST provide two reports from academic referees – please contact the School of Occupational Therapy, Division of Allied Health (03) 9479 5815 to obtain a copy of required report.
- Applicants to:
  - Master of Occupational Health
  - Master of Occupational Therapy
  - Postgraduate Diploma in Occupational Health & Safety and
  - Postgraduate Certificate in Occupational Health & Safety

MUST provide:

- A curriculum vitae outlining our recent employment history – including positions held, responsibilities and employers' contact details; as well as information on professional affiliations, relevant conference presentations, publications and community involvement, and contact details for two referees; AND
- A personal statement no longer than one page (see SECTION 7).

For further information, please contact the School of Occupational Therapy – telephone: (03) 9479 5733

- Applicants to the Master of Speech Pathology MUST provide two reports from senior academics familiar with their recent achievements.
- Applicants to all School of Public Health courses MUST contact [phe.postgraduate@latrobe.edu.au](mailto:phe.postgraduate@latrobe.edu.au) for details about requisite information.
- Applicants to all postgraduate Gerontology courses MUST contact [aipc@latrobe.edu.au](mailto:aipc@latrobe.edu.au) for details about requisite information.
- Applicants to Art Therapy, Counselling and Human Services and Counselling Psychology courses MUST contact [phe.postgrad@latrobe.edu.au](mailto:phe.postgrad@latrobe.edu.au) for details about requisite information.
- Applicants to all of The Bouverie Centre courses please go to [www.latrobe.edu.au/bouverie](http://www.latrobe.edu.au/bouverie) or contact [bouverie.academic@latrobe.edu.au](mailto:bouverie.academic@latrobe.edu.au) for details about requisite information.
- Applicants to:
  - Bachelor of Education in LOTE (AUSLAN) (Graduate Bachelor)
  - Graduate Certificate in Deaf Studies
  - Graduate Diploma in Deaf Studies
  - Master of Arts (Deaf Studies)
  - Master of Education (Deaf Studies)
  - Master of Sign Language

MUST contact (03) 9479 2283 (voice & TTY), or email: [nids@latrobe.edu.au](mailto:nids@latrobe.edu.au) for details about requisite information.

### Faculty of Law and Management

- All courses offered by the Graduate School of Management require two reports from senior professionals and/or academic referees familiar with the applicant's recent achievement.

### Faculty of Science, Technology and Engineering

- Applicants to the Master of Clinical Psychology and Master of Clinical Neuropsychology must provide two academic and two professional references. Contact the Faculty to obtain proformas for referees to complete and return – telephone: (03) 9479 2059/2556 or email: [setyourselfapart@latrobe.edu.au](mailto:setyourselfapart@latrobe.edu.au)

## SECTION 7: ADDITIONAL INFORMATION

You may support your application with any additional material you believe will be relevant in the evaluation of your application. Such information could include your curriculum vitae, proof of having completed a similar course at La Trobe; publications you have written/presentations you have made, scholarships, prizes, medals and/or awards you have received and memberships with professional affiliations. You should also attach a short personal statement (300 – 400 words) outlining your reasons for applying to your chosen course, why you believe you should be selected and what you hope to gain from the course.

## SECTION 8: DECLARATION AND AGREEMENT

I declare that the information provided on this form is true and complete in every detail. I authorise La Trobe University to contact my former educational institutions in order to verify any of the information I have provided with this application, if deemed necessary. I understand the University reserves the right to vary or reverse any decision made on the basis of incorrect or incomplete information provided by me.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

### Privacy Notice

Details regarding collection, use disclosure and access of personal information from this form are available from the following website address [www.latrobe.edu.au/privacy](http://www.latrobe.edu.au/privacy), or by contacting your local Student Administration Office, or by telephone at (03) 9479 2005.

## SECTION 9: CHECKLIST

Please use the following checklist to ensure your application is complete and eligible for processing. Make sure you have:

- Completed SECTION 1, including information about your previous study at La Trobe University and provision of certified copies of evidence relating to a change of name
- Completed SECTION 2, indicating the preferred course for admission
- Completed SECTION 3, indicating ALL educational qualifications attempted
- Attached certified copies of ALL educational qualifications attempted
- Completed SECTION 4
- Completed SECTION 5
- Completed SECTION 6
- Provided all supplementary forms and information required, as listed in SECTIONS 6 and 7
- Ensured the correct number of signed, confidential referee reports is attached OR forwarded (to the relevant Faculty) by referees
- Signed and dated the Applicant's Declaration at SECTION 8
- Checked eligibility for a Commonwealth Supported place or Fee Paying Place on the Going to Uni website: [www.goingtouni.gov.au](http://www.goingtouni.gov.au)
- Attached any other relevant supporting information

## OFFICE USE ONLY

Application admission Basis (i.e. V12, E33): \_\_\_\_\_

Course Code: \_\_\_\_\_

### Selection Outcome – Qualification

Qualified for Admission     NOT Qualified for Admission

### Selection Outcome – Offer status

Offer                       Semester 1             Semester 2  
 Full – time             Part – time  
 Conditional Offer (please include condition)  
 Rejected application                       Pending application

### Selection Outcome – Fee Status

Commonwealth Supported Place (CSP)  
 Fee Offer

### Application Authorisation

All applications MUST be signed and dated. Applications **WILL NOT** be accepted without this information.

Signature: \_\_\_\_\_

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

Position: \_\_\_\_\_

SIS ID Number: \_\_\_\_\_

Extension: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## ADMINISTRATIVE USE ONLY

Student ID Number: \_\_\_\_\_

Application Entered: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Acknowledgement letter sent: / /

Selection outcome entered: / /

Application notified of outcome: / /

Other correspondence: / /

Conditional Offer or Special Conditions on Enrolment: \_\_\_\_\_