

This form is for new and previously enrolled Professional Development applicants. If you have previously studied a Professional Development course, enter your student number: _____

1 Personal Details:**Title:****First Name:****Family Name:****Date of Birth:****Mailing Address** (please include address, suburb, state, postcode and country):**Email:****Phone Number:****2 Citizenship Status****Citizenship Status** (please circle):

Australian Citizen
New Zealand Citizen
Granted Permanent Residence Status
Exchange Student with Temporary Resident Visa
Temporary Resident Visa, Visitors Visa, Student Visa
Australian Permanent Humanitarian Visa
Living Outside Australia
Not an Australian or New Zealand Citizen
Permanent Resident

In What Country Were You Born:**In What Year Did you Enter Australia?**

NB: If you are residing in Australia and do not have Australian Citizenships, NZ Citizenship or Permanent Residence status what is you address in you home country.

Home Address (please include address, suburb, state, postcode and country):

3 Enrolment

| Row | Course Code | Course Name | Semester | | | Mode |
|-----|-------------|-------------|--------------------|---|---|--|
| | | | Circle Your Choice | | | |
| 1. | | | 1 | 2 | 3 | On campus – Toowoomba On campus – Fraser Coast On campus – Springfield Distance Education Online |
| 2. | | | 1 | 2 | 3 | On campus – Toowoomba On campus – Fraser Coast On campus – Springfield Distance Education Online |
| 3. | | | 1 | 2 | 3 | On campus – Toowoomba On campus – Fraser Coast On campus – Springfield Distance Education Online |
| 4. | | | 1 | 2 | 3 | On campus – Toowoomba On campus – Fraser Coast On campus – Springfield Distance Education Online |

Subjects studied under professional development are full fee paying.

4 Student Declaration

Your application is unable to be considered if this declaration is not signed.

- a) I agree to comply with the statutes, regulations and policies of the University of Southern Queensland.
- b) The information I have supplied is accurate and complete.
- c) I understand that if I supply inaccurate or incomplete information to USQ, USQ may cancel my enrolment.
- d) I understand I am responsible for providing all necessary documentation as evidence of my qualification, studies and relevant experience.
- e) I give permission for any person, government authority, educational institution, employer or previous employer to provide any information concerning my admission/enrolment and study program to USQ that USQ requests.

Signature:

Date:

USQ collects personal information to assist the University in providing tertiary education and related ancillary services and to be able to contact you regarding enrolment, assessment and associated USQ services. The information may be made available to Commonwealth and State agencies and the ESOS Assurance Fund Manager pursuant to obligations under the Education Services for Overseas Students Act 2000 and National Code or other legislative requirements. Personal information will not be disclosed to third parties other than a USQ approved agent, partner or any organisation who provides sponsorship to you for your studies, without your consent unless required by law.