



AustraLearn Application

To Study for a Semester or Year Abroad
AUSTRALIA or NEW ZEALAND
(Refer to the APPLICATION PROCEDURES
on the opposite page for further instructions.)

PAPERCLIP 2" X
2" ORIGINAL PHOTOS
(of your head and
shoulders) HERE .
Write your name on the
back of the photos.

Australia - 4 photos
New Zealand - 6 photos

NAME: _____
FIRST MIDDLE LAST

HOME UNIVERSITY: _____

RESIDENTIAL SCHOOL ADDRESS:

Street: _____
City: _____
State: _____ Zip: _____ Country: _____
Telephone: () _____ Fax: () _____
Cell Phone: () _____

RESIDENTIAL PERMANENT ADDRESS:

Street: _____
City: _____
State: _____ Zip: _____ Country: _____
Telephone: () _____ Fax: () _____
E-mail: _____

PLEASE NOTE:

- AustraLearn will send you mail at the school address Jan 1 - May 5 and Aug 30 - Dec 5. All other times mail will be sent to your permanent address unless otherwise notified.
- Notifications and updates will be sent to your web accessible e-mail address. You should check this account weekly for messages.

** Please make sure that your e-mail address is web accessible and able to receive messages from australearn.org. (You may need to adjust your junk mail filter.)

Do you have a passport: YES NO In Process
If no, please obtain a passport application from a post office to begin the process immediately. The issuance of a passport can (at times) take 2 to 3 months.

PERSONAL INFORMATION:

Sex: M F Date of Birth (M/D/Y): _____
Country of Citizenship: _____
Country of Birth: _____

Date of Expiration: _____ Country of Issuance: _____

Have you lived outside the U.S. for more than 3 months in the last 5

CHOOSE YOUR UNIVERSITY: ** Please number your first 2 choices (1,2).

AUSTRALIA

- ___ Australian National University* ___ Macquarie University*
- ___ Bond University* ___ Monash University
- ___ Central Queensland University ___ Murdoch University
- ___ Edith Cowan University ___ QUT
- ___ Griffith University ___ Southern Cross University
- ___ Brisbane Campus ___ University of Adelaide
- ___ Gold Coast Campus ___ University of Canberra
- ___ James Cook University ___ University of Melbourne
- ___ Cairns Campus ___ University of Newcastle
- ___ Townsville Campus ___ University of Queensland
- ___ La Trobe University* ___ University of South Australia
- ___ Bundoora Campus ___ University Tasmania*
- ___ Bendigo Campus ___ University of Wollongong

NEW ZEALAND

- ___ Auckland University of Technology
- ___ Lincoln University
- ___ Massey University
- ___ Palmerston North
- ___ Wellington
- ___ University of Auckland
- ___ University of Canterbury
- ___ University of Otago
- ___ University of Waikato
- ___ Victoria University of Wellington

SPECIALTY PROGRAMS

- ___ University of New South Wales
- ___ Macquarie University - International College of Management, Sydney (ICMS)
- ___ Bond University Study Abroad/Internship
- ___ Australian Ecology Experience at Queensland University of Technology

CHOOSE YOUR DATES:

- Preferred Semester Start Date
- January 200 _____ (Bond U. + ICMS)
 - February 200 _____
 - May 200 _____ (Bond U. + ICMS)
 - July 200 _____
 - September 200 _____ (Bond U. + ICMS)

Length of Program

- Semester Abroad
- Year Abroad

*Ask your coordinator upon acceptance about the internship offered with this university.

ACCOMMODATION REQUEST:

1. ___ Apartment Living Arranged Upon Arrival
2. ___ Prearranged Accommodation With Meals
3. ___ Prearranged Accommodation Without Meals
4. ___ Homestay (not readily available)

Please describe any dietary/allergy restrictions with regard to a living situation: _____

Please describe any other information we should know about your housing preference: _____

ETHNIC BACKGROUND (OPTIONAL): The information requested below is strictly voluntary and will be used only for data collection. It will not be used as a basis for admission or in a discriminatory manner.

- African-American Chicano or Mexican-American Multi-Ethnic Background American Indian or Alaskan Native
Hispanic Asian Pacific Islander White, Non-Hispanic Other:

PERSONAL STATEMENT: Please provide brief answers (maximum of two double-spaced pages) on a separate sheet of paper.

- 1) Why have you chosen Australia/New Zealand as your study abroad destination? In addition, please explain your reasons, both academically and culturally, for your top two university or program choices.
- 2) Please describe your personal interests, career aspirations, university activities, work and volunteer experience.
- 3) Describe any previous study or travel experiences abroad.
- 4) Do you have any special needs that the Australian/New Zealand university needs to be aware of in order to accommodate any portion of your program?
- 5) How did you learn about AustraLearn?

ACADEMIC INFORMATION:

Home University: _____

Class Standing (circle one): **Freshman** **Sophomore** **Junior** **Senior** Other: _____ US Students: GPA (on a 4.0 scale) _____

Other universities/colleges attended: _____

Major: _____ Minor: _____ Expected Graduation Date: _____

1) PARENT OR GUARDIAN INFO:

Name: _____

Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: () _____ Work: () _____

Cell #: _____

E-mail: _____

2) PARENT OR GUARDIAN INFO:

Name: _____

Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: () _____ Work: () _____

Cell #: _____

E-mail: _____

Person to contact in case of emergency? **1** **2** **Both**

Do you give AustrLearn permission to provide advice to your parents or guardian with regard to your involvement in the AustrLearn program, including general program details, financial information, and emergency health and safety matters? YES NO

FINANCIAL/PROGRAM APPROVAL INFORMATION

Do You Receive Financial Aid? YES NO

You should check with your home university's financial aid office about having this financial aid transfer to your program in Australia/New Zealand. AustrLearn is available to consult with you on these matters.

TO BE COMPLETED BY STUDY ABROAD ADVISOR/INTERNATIONAL PROGRAMS OFFICER AT YOUR HOME UNIVERSITY

- a. Is this student seeking an undergraduate degree at the home university? Yes No
- b. Is the student considered to be in good academic standing? Yes No
- c. Has this student ever been involved in any serious legal or disciplinary action while attending your university? Yes No (If yes, please provide the official record.)
- d. Has this student ever been on academic probation while attending your university? Yes No
- e. Does this student have the home university's approval to study abroad in Australia or New Zealand through AustrLearn? Yes No

Signed: _____

Name: _____ Title: _____

University Name: _____ Name of Office: _____

Address: _____ City: _____ State: _____ Zip: _____

TO BE COMPLETED BY THE AUTHORIZED PERSON TO APPROVE CREDIT TRANSFER AT YOUR HOME UNIVERSITY

- a. The home university will transfer credits: Yes No
- b. The home university will transfer credits if the student receives satisfactory marks equivalent to the U.S. grade of _____.
- c. The home university will transfer failing marks: Yes No
- d. The home university will award: (Circle One) Letter Grades Pass/Fail Transfer Credit Other _____.
- e. These marks will be calculated in his/her GPA: Yes No

Signed: _____ Name: _____

Title: _____ E-mail: _____ Phone: _____

Declaration

I hereby certify that to the best of my knowledge the information provided and the statements I have made on this application are true and complete. I understand that if found otherwise, it is sufficient cause for refusal or dismissal.

I authorize AustrLearn to forward copies of my application including transcripts and any and all records to U.S./overseas institutions and personnel with regard to participation in this program.

I hereby authorize the host university to forward an original transcript to AustrLearn, who will then forward the original transcript to my home university.

I hereby allow the release of information between the host university, the home university and AustrLearn when it concerns health, safety and disciplinary matters.

I hereby give my consent to the AustrLearn resident director or other appointed program provider official, to secure necessary medical treatment through appropriate medical staff in case of extreme medical emergency if I am physically unable to give such consent or when a delay in obtaining such consent could constitute a serious risk of life.

I agree to abide by the rules and regulations of AustrLearn, the host university, U.S. sponsoring university and/or program provider. I understand that failure to do so may result in immediate dismissal from the program.

I hereby authorize AustrLearn to distribute my name, address, email address and telephone numbers to other participants who will be attending the program prior to departure.

Signed: **X** _____ Date: _____

NOTE: THIS APPLICATION IS NOT COMPLETE UNTIL ALL OF THE FOLLOWING ARE RECEIVED

- ____ Completed application with all signatures
- ____ Personal statement
- ____ Web accessible e-mail address
- ____ \$30 USD non-refundable application fee (Payable to AustrLearn)
- ____ 2" x 2" original photos (of your head and shoulders) Australia - 4 photos, New Zealand - 6 photos
- ____ Official transcript
- ____ Faculty reference form



AustrLearn: Study in Australia, New Zealand, and the South Pacific
12050 N. Pecos Street, Suite 320
Westminster, CO 80234
E-mail: studyabroad@austrlearn.org
1-800-980-0033
Fax: (303) 446-5955

STUDENTS SIGN HERE

Faculty/Advisor Reference Form (Side 1)

APPLICATION DEADLINES:

Bond University and ICTHM: June 15th for September Start and October 15th for January Start

All other Universities: November 15th for February Start and April 15th for July Start

TO THE APPLICANT:

This reference should be completed by a faculty member. Employers are not acceptable references. Please answer the first 5 questions on this form and then give it to the faculty person who will provide the reference.

1. **Student Name:** _____
FIRST MIDDLE LAST
2. My major is _____. I am planning to study mainly _____ in Australia/New Zealand.
3. Name of the faculty person who will be asked to fill out this form: _____
4. I am planning to study abroad either: **Semester** **Year** Program beginning ____ (Month) ____ (Year)
5. I, _____ hereby **Waive** **Retain** my right to have access to the information provided in this reference.

Signed: _____ **Dated:** _____

TO THE FACULTY/ADVISOR:

The above student is requesting your assistance in providing a reference for his/her participation in a program listed through AustraLearn: North American Center for Australian and New Zealand Universities. Semester and Year abroad programs consist of direct-enrollment at an Australian or New Zealand university.

Overseas experience is considered an important part of education. While these opportunities have many benefits, the overseas experience can challenge and build upon a student's ability to interact with a variety of situations, one of which is the foreign academic system. The following information will help us select students who will be able and willing to gain the most from such an experience. We appreciate your time and consideration.

After completing this form (front and back), please send/fax it directly to:

AustraLearn: North American Center for Australian and New Zealand Universities
12050 N. Pecos Street, Suite 320
Westminster, CO 80234
Fax: (303)446-5955

** If you have any questions about this recommendation form or any of the programs offered through AustraLearn, please contact us at 1-800-980-0033.

Faculty/Advisor Reference Form (Side 2)

GENERAL INFORMATION

Name: _____

Title: _____ Department: _____

College/University: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: () _____ Fax: () _____ E-mail Address: _____

Reference for Student: _____

First Name

Last Name

1. Please indicate any classes which the above student has taken from you.

If you have not had this student in class, how do you know the applicant?

2. In general, how do you feel the applicant will benefit both personally and academically from an overseas experience?

3. Please rank the applicant in the following categories.

	Poor	Average	Good		Poor	Average	Good				
Ability to work independently	1	2	3	4	5	Self-Confidence	1	2	3	4	5
Reliability	1	2	3	4	5	Positive association with others	1	2	3	4	5
Degree of focused academic interest	1	2	3	4	5	Honesty	1	2	3	4	5
Current academic performance	1	2	3	4	5	Flexibility to adapt to new situations	1	2	3	4	5
Potential for academic success	1	2	3	4	5	Maturity	1	2	3	4	5
Capacity for innovation	1	2	3	4	5						

Please briefly describe the most positive aspects, both personally and academically, of the applicant.

Please briefly describe reservations, if any, you may have with regards to this student's participation in an overseas program.

Final Comments:

Signature: _____ Date: _____

**PLEASE RETURN AS SOON
AS POSSIBLE TO:**



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and New Zealand Universities
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