

STUDY ABROAD SHORT-TERM APPLICATION FORM

1. Personal Details	
Student Number:	Preferred Title (Mr / Mrs / Ms etc):
Surname (as per Passport):	
Given Name/s:	Date of Birth (dd/mm/yy): //
Gender (Male/Female/Other):	Are you an International Student? O Yes O No
Nationality:	Passport Country of Issue:
Passport Number:	
USQ Email:	Personal Email:
Address Information	
Home Address:	Mailing Address if different from home:
Number and Street:	Number and Street:
City:	City:
State:	State:
Country:	Country:
Zip/Postcode:	Zip/Postcode:
Mobile Phone:	
Home Phone:	
Do you have a disability, impairment or lo	ong term medical condition, which may affect your studies?
O Yes O No	
If yes, please specify	
Emergency Contact Details	
Name:	
Mobile Phone:	Home Phone:
Relationship to Student:	Email:

2. USQ Program Information Campus: O Toowoomba O Springfield O Ipswich O Online/External Program Code: _____ Program Title: _____ Majors: _____ Minors: _____ I am studying O Full-time O Part-time 3. Financial Plan The purpose of the financial plan is for students to estimate the costs associated with the Study Abroad Program. Students may be required to show evidence of financial capabilities in order to be granted a visa for some countries. Funds Available AUD **Estimated Expenses** AUD Savings to date Airfare Expected savings now to departure Visa Travel/Medical insurance Family/Other contributions Centrelink Accommodation OS Help (if eligible) Living costs (food etc) New Colombo Plan (if eligible) Transport USQ International Grant Scholarships/other – please specify Other – please specify Total funds available **Total estimated expenses** 4. Proposed Program and Study Plan Host Institution name and Country: _____ Program Name: ______ Program Dates: _____

Host Institution Course Details		USQ	Faculty/Department		
Course Code	Unit Title	Semester	Course Code	USQ Credit Points	Faculty Approval

5. Faculty Approval (to be completed by your Faculty)	
The Faculty of does appro-	ve this
applicant to participate in the study abroad program.	
Name: Date: / / Signature:	
6. Student Checklist and Signature	
☐ I have adequate financial resources to enable me to participate in an overseas study expe	rience
	richec.
\square The information provided, to the best of my knowledge, is correct and complete.	
\square Approval of my overseas study experience is dependent on USQ International, my host insubject to immigration clearance from the host country. As I am responsible for all immigrate have sought information about how to obtain a student visa to enter the host country.	
☐ Withdrawing from the overseas study program without authorisation from USQ Internation in me being required to repay all or part of any grant paid to me, as determined by USQ Internation	•
\square Upon completion of my overseas study program I may be contacted by the University of S Queensland to provide a written report and photos or video.	Southern
\square I understand that if I vary my enrolment I must seek approval for these changes. If I do rapproval, I understand I may not receive credit for my studies overseas.	not get
\square I may be required to apply for a credit transfer upon completion of my overseas study pro	gram.
Student Signature: Date:/	

Please return this completed form to studyabroad@usq.edu.au.

7. Privacy Policy

USQ collects your information for the purpose of providing products and services selected by you through your learning journey. Not all information is personal information under the *Privacy Act 2009* (Qld). To comply with legal and administrative obligations information may be disclosed to Commonwealth and State agencies.

Personal information will not be disclosed to third parties, other than approved educational services agents, partners or organisations who provides sponsorship to you for your studies, without your consent unless required or permitted by a law. Where we disclose to a third party we endeavour to ensure they are bound by the same requirements as USQ with respect to your personal information. Transfer of personal information outside Australia may occur.

You have the right to access your personal information and if you wish to inquire about the handling of, or seek access to your personal information, you can contact the USQ Privacy Officer (privacy@usq.edu.au).