STUDY ABROAD APPLICATION FORM



1. Personal Details

Student Number:	Preferred Title (Mr / Mrs / Ms etc):
Surname (as per Passport):	
Given Name/s:	
Gender (Male/Female/Other):	Are you an International Student? Yes No
Nationality:	Country where Passport Issued:
Passport Number:	
USQ Email:	Personal Email:
Address Information	
Address in Home Country	Mailing Address Same as home address
Number and Street:	Number and Street:
City:	City:
State:	State:
Country:	Country:
Zip/Postcode	Zip/Postcode
Mobile Phone:	
Home Phone:	
	g term medical condition which may affect your studies? Yes No
If yes, please specify:	
Emergency Contact Details	
Name:	
Mobile Phone:	Home Phone:
Relationship to Student:	Email:
2. USQ Program Informa	tion
Campus: Toowoomba Springfield	d Ipswich Online/External
Program Code:	I am studying:
Program Title:	Full Time
	Part Time
Minors:	

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 student visa for some countries.

Funds Available	AUD	Estimated Expense AU\$ AU		
Savings to date		Airfare		
Expected savings now to departure		Visa/s		
Family/Other contribution		Travel/Medical insurance		
Centrelink		Accommodation		
OS Help		Living Costs (food etc.)		
USQ International Grant		Transport		
Scholarships - please specify		Books/stationery		
		Other - please specify		
Total funds available		Total estimated expenses		

4. Preferred Host Instit	tution	Program Duration
Overseas Institution or study program r	name:	—— 1 Semester
Country:		2 Semesters
I am applying for: Semester:	Year:	Short Term Less than 1 Semester
If you are applying for a short term study	dy program, please provide the details of your pro	ogram
Program Dates		
USQ Program Coordinator		
USQ Course		

5. Proposed Study Plan

Short Term Program (Less than 1 semester)

			Faculty use only		
Unit code	Unit title	% of Credit	Semester	USQ Credit Points	Faculty/Dept Approval

Semester-long program (1 or 2 semesters)

				Faculty use only	
Unit code	Unit title	USQ equivalent	Semester	USQ Credit Points	Faculty/Dept Approval

Note: Students MUST have approval from the Faculty Course Advisor or Program Coordinator for their proposed study plan. Students MUST provide detailed unit descriptions, in English, to Course Advisors and a copy of the completed Study Abroad application form.

6. Faculty Approval (to be filled in by your Faculty) Credit points earned: _____ Credit points required to complete degree: Special requirements: Comments: Note: Double Degree students should seek approval from both Faculties The Faculty of does not - approve this applicant to participate in the Study Abroad Program. does Name: Faculty Signature: Date: The Faculty of does not - approve this applicant to participate in the Study Abroad Program. does Name: _____ Paculty Signature: _____ Date: ____ 7. Statement of Purpose Please attach a typed statement explaining your reasons for wanting to study abroad. Include what you hope to achieve, challenges you think you will face and how you predict your overseas experience will affect your academic, personal and career goals. 8. Student Checklist I have adequate financial resources to enable me to participate in an overseas study experience The information provided, to the best of my knowledge, is correct and complete Approval of my overseas study experience is dependent on USO International, my host institution and is subject to immigration clearance from the host country. As I am responsible for all immigration issues, I 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 International may result in me being required to repay all or part of any grant paid to me, as determined by USQ International. Upon completion of my overseas study program I may be contacted by the University of Southern Queensland to provide a written report and photos or video I understand that if I vary my enrolment I must seek approval for these changes. If I do not get approval I understand I may not receive credit for my studies overseas. I may be required to apply for a credit transfer upon completion of my overseas study program. For Semester-long programs It is my responsibility to maintain a full time study load for the term of my exchange and failing to do so may have implications for my visa. Student Signature: Date (dd/mm/yy): / /

Student Checklist

I hereby submit this application for placement in the Study Abroad program, and have attached the following compulsory documents:

1 Academic Reference Statement of Purpose USQ Student Mod University of Sour Toowoomba | QLI T

University of Southern Queensland is a registered provider of education with the Australian Government

USQ Student Mobility Officer University of Southern Queensland Toowoomba | QLD | 4350 | Australia

Phone: +61 7 4631 5543 Email: studyabroad@usq.edu.au

web: usq.edu.au/current-students/academic/study-abroad-and-exchange

9. Privacy Policy

USQ collects your information for 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 agent, partner or organisation 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 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 or seek access to your personal information you can contact the USQ Privacy Officer (privacy@usq.edu.au).

10. Academic Reference

To be completed for Semester-long study programs only

Note: This section is to be completed by a USQ academic staff member. References for the ISEP program must be completed on the ISEP online form. Full Name of Applicant: _____ Name of Referee: _____ Title/Position: _____ Department/Faculty: _____ Telephone: ______ Email: _____ The student whose name appears above is applying for the Study Abroad Program to study overseas. Your candid opinion of the student's intellectual abilities, maturity and capability to study and live overseas is important in determining if the student has the qualities necessary to successfully complete the Study Abroad Program. 1. How long, and in what capacity, have you known the applicant? 2. Please add any comments which you feel would be helpful in determining the suitability of the applicant for an international study experience Referees Signature: _____/ ___/____/