# Swinburne University of Technology
## Sarawak Campus
## Application Form for Admission

application

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### SECTION A: PERSONAL DETAILS

If previously enrolled at Swinburne University of Technology, please state ID number _____ (Swinburne ID number)

**PRINT YOUR NAME AS IT APPEARS IN YOUR NRIC/PASSPORT. Please use BLOCK LETTERS. All fields must be completed.**

Title: _____ (Mrs, Miss, Ms, Mr etc)   Gender: ☐ Female ☐ Male   Date of birth: ☐☐ / ☐☐ / ☐☐
Day  Month  Year

Family name: (as indicated in NRIC/passport)

Given names: (leave spaces between names)

Email address: (for applicant) _____

APPLICANTS **MUST** PROVIDE THEIR PERSONAL EMAIL ADDRESS. ALL INFORMATION REGARDING THE PROGRESS OF THE APPLICATION WILL BE EMAILED DIRECTLY TO THE APPLICANT OR SWINBURNE SARAWAK REPRESENTATIVE.

Postal address:

| c | / | o | | I | E | C | | O | n | l | i | n | e | | G | m | b | H | | |
Number/street

| M | a | r | i | e | n | s | t | r | a | s | s | e | | 1 | 9 | - | 2 | 0 | | |

| B | e | r | l | i | n | | | | | | | | | | | | | | | |
State/town/city

| G | e | r | m | a | n | y | | | | | | | | | 1 | 0 | 1 | 1 | 7 | |
Country                                              Postcode

Residential address: (if different from above and should not be the same as your agent)

Number/street

State/town/city

Country                                              Postcode

Telephone: _____   Fax: _____   Mobile: _____

Do you have any medical condition that requires the attention of the university? ☐ Yes ☐ No
Note: this is for support purposes only and will not affect the outcome of your application.

If yes, please provide details: _____

Have you been granted a scholarship/loan of any kind? ☐ Yes ☐ No   Scholarship name: _____
eg. Yayasan Sarawak Scholarship Loans, PTPTN, Higher Education Fund, Yayasan Tunku Abdul Rahman, etc.

Country of citizenship: _____   Submission location: _____
(What country were you in when you submitted this application?)

Country of birth: _____   Race: _____   Religion: _____

Identity Card (IC) or Passport number:
(for Malaysian students only)   (for International students only)

Passport expiry date: ☐☐ / ☐☐ / ☐☐
Day  Month  Year

**FOR INTERNATIONAL STUDENTS ONLY**

Do you hold a valid Malaysian visa? ☐ Yes ☐ No

If yes, type of visa: _____   Visa expiry date: ☐☐ / ☐☐ / ☐☐
Day  Month  Year

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### SECTION B: COURSE PREFERENCES

| Course preference | Intake | Year |
|---|---|---|
| eg. Bachelor of Business | February | 2008 |
| 1 | | |
| 2 | | |
| 3 | | |

Please note that students who have not satisfied a minimum requirement in English proficiency will be required to take a Swinburne Sarawak English Placement Test. Students who do not meet the English entry requirements will be required to take up an English program recommended by the University at their own cost.

Have you taken an English proficiency test within the last 12 months? ☐ Yes ☐ No   Date of test: ☐☐ / ☐☐ / ☐☐
Day   Month   Year

Test type: _____   Result: _____
(eg. IELTS, MUET, TOEFL, SPM, 1119)   (if known)

If yes, please submit a certified copy of your results as soon as available.

## SECTION D: EDUCATION DETAILS

A certified copy or original transcripts of all official results must accompany this application. Please include the grading system to enable interpretation of academic results. List any studies you have attempted, whether complete or incomplete. If you would like Swinburne to consider your employment history in support of your application, please attach your curriculum vitae (resumé).

### Secondary school studies

| Month/year commenced | Month/year completion (expected or actual) | Title of course (eg. A Levels) | Name and country of school |
|---|---|---|---|
| 1 | | | |
| 2 | | | |

### Tertiary or post-secondary studies

| Month/year commenced | Month/year of completion (expected or actual) | Title of course (eg. Bachelor of Business) | Name and country of institution | Full-time or part-time |
|---|---|---|---|---|
| 1 | | | | |
| 2 | | | | |

Are you applying for Credit Transfer or Recognition of Prior Learning (RPL)?   Yes ☐   No ☐
If yes, you must attach a detailed course or unit (subject) syllabus.

## SECTION E: CHECKLIST AND DECLARATION

Make sure the following are attached:

Certified copies of:

☐ Academic transcripts with grading system

☐ Course or unit (subject) syllabus outlines if applying for credit transfer

☐ English proficiency test results

☐ Birth certificate and identity card (IC)
(Malaysian students only)

☐ Application fee of RM100, non-refundable
(Malaysian students only)

☐ Passport size photos 7 copies (blue background)
(International, West Malaysian and Sabahan students)

☐ One set (all pages) passport
(International, West Malaysian and Sabahan students only)

☐ Original medical report from country of origin
(International students only)

### Applicant's declaration

1. I declare that the information submitted with this application is true and complete. I further declare that any tertiary academic results submitted are a complete record of all results I have obtained from every tertiary institution I have attended.

2. I acknowledge that failure to disclose my academic record may result in the University revoking an offer or terminating my studies at any stage.

3. I authorise the University to seek verification of my academic and professional qualifications, and work experience. I understand that the University reserves the right to inform other tertiary institutions and regulatory agencies if any of the material presented to support my application is found to be false.

4. I understand that at the time of enrolment I will be required to supply originals of all documents used to support this application.

5. I acknowledge that the University reserves the right to alter any course, subject, admission requirement or fee without prior notice.

6. I understand that the personal information I have provided may be released to government agencies as required by law. I further understand that it may be disclosed to third parties for the purpose of processing my application.

7. I understand that the acceptance of this application is at the absolute discretion of the University.

Signature of applicant: _____   Date: ☐☐ / ☐☐ / ☐☐
Day   Month   Year

| OFFICE USE ONLY | SEND APPLICATION TO: |
|---|---|
| Application fee paid?   Yes ☐   No ☐   OR No. _____ <br><br> Course offered: _____ <br><br> Approved by: _____   Date: ☐☐ / ☐☐ / ☐☐ <br> Day   Month   Year <br><br> English Placement Test (EPT) required?   Yes ☐   No ☐ <br><br> Condition: _____ <br> _____ | Swinburne University of Technology <br> Sarawak Campus <br> Business Development & Communications Department <br> Jalan Simpang Tiga <br> 93350 Kuching <br> Sarawak Malaysia <br><br> Tel:   +60 82 415 353 <br> Fax:   +60 82 428 353 <br> Email:  info@swinburne.edu.my <br> www.swinburne.edu.my |

application

SWINBURNE
UNIVERSITY OF
TECHNOLOGY
SARAWAK CAMPUS