



**This form is to be used by prospective students who wish to apply for cross-institutional study.**

**Cross institutional study is when;**

- A student's home provider allows them to study at the University of South Australia, and
- The courses undertaken at the University of South Australia will count towards the award being undertaken at the home provider.

**Please complete each section carefully and attach the relevant documents as indicated in the checklist which forms part of the student declaration in Section 5.**

**This form must be complete and all documents attached before being lodged with Campus Central. Forms that are not complete will be returned and may result in an unsuccessful application due to late submission.**

### Important Information

#### Cross-Institutional students

- Cross institutional study is enrolment in one or more UniSA courses that contribute to a student's program requirements at another registered provider.
- Students studying via Open Universities Australia are not eligible to undertake cross institutional enrolments. Please submit an Application for Admission – Non-Award.
- Fees for cross-institutional enrolments are based on student's fee paying status at their home institution. If a student is Commonwealth supported at their home institution they will be Commonwealth supported for their cross-institutional enrolment. If a student is fee paying at their home institution they will be fee paying for their cross-institutional enrolment.
- If FEE-HELP or HECS-HELP is required students **must** submit a paper request form when submitting their application. These forms are available from your home institution or UniSA Campus Central (contact details as below).
- Students may be required to provide evidence of their fee paying status at their home institution when applying for admission to cross-institutional study.
- International students wishing to enrol on a cross-institutional basis must ensure that any relevant visa requirements are met.
- Cross institutional students will have access to University information technology resources and automatic borrowing rights with the library.
- Tuition fees are set by each Division and are available at [unisa.edu.au/fees/nonaward.asp#Cross-institutional](http://unisa.edu.au/fees/nonaward.asp#Cross-institutional)
- Cross-institutional enrolments may incur the Student Services and Amenities Fee (SSAF). You will not be eligible to defer this fee to SA-HELP. For further information, visit: [unisa.edu.au/fees/ssaf](http://unisa.edu.au/fees/ssaf)

#### Clinical / Field placements within a course

Applications for enrolment in courses requiring clinical or field placement will need the Course Coordinator to confirm that a placement will be available for the student. Students wishing to enrol in these courses will be required to provide evidence of current student registration with the relevant registration board.

#### Application time lines

**You are required to lodge this application with Campus Central no later than two weeks prior to the commencement of teaching for the relevant study period in order to ensure access to course materials and services.** Late applications will be subject to approval by the relevant Course Coordinator. Key dates for each study period are listed at <http://www.unisa.edu.au/Student-Life/Support-services/Student-administration/Academic-calendars/>

#### More information

For more information about fees please call Student Finance on 8302 1112.

For more information about these types of enrolment, please read the Enrolment Policy ([www.unisa.edu.au/policies/policies/academic/A48.asp](http://www.unisa.edu.au/policies/policies/academic/A48.asp)) or contact Campus Central on 1300 301 703.

### LODGING YOUR APPLICATION

#### In person

##### **City East**

Campus Central  
Level 3  
Playford Building

##### **City West**

Campus Central  
Level 2  
Jeffrey Smart Building

##### **Magill**

Campus Central  
Level 1  
B Block

##### **Mawson Lakes**

Campus Central  
Ground Floor  
C Building

##### **Mount Gambier**

Learning Centre  
Wireless Road West  
Mount Gambier SA  
5290

##### **Whyalla**

Campus Central  
Ground Floor  
Main Building  
111 Nicolson Ave  
Whyalla Norrie SA  
5608

#### By post

University of South Australia  
Campus Central – (name of campus)  
GPO Box 2471  
Adelaide SA 5001

#### By email

[ask@campuscentral.unisa.edu.au](mailto:ask@campuscentral.unisa.edu.au)



Section 1: Personal details									
Student ID:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(Please complete ID if you are a previous UniSA student)
Mr/Miss/Ms/Mrs:					First name(s):				
Family name:									
Date of birth:			Country of birth:						
Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Country of citizenship:						
Home address									
Address line 1:									
Address line 2:									
Address line 3:									
City / Suburb:					State / Province:				
Country:					Postcode / Zip:				
Mailing address (if different from above)									
Address line 1:									
Address line 2:									
Address line 3:									
City / Suburb:					State / Province:				
Country:					Postcode / Zip:				
Phone details									
Home phone:					Mailing address phone:				
Mobile:					Fax:				
Preferred contact:	<input type="checkbox"/> Home	<input type="checkbox"/> Mobile	<input type="checkbox"/> Mailing	<input type="checkbox"/> Fax					
Email details									
Please provide an email address to be used for processing this application. Cross-institutional students will be issued a UniSA email account for future communication.									
Email:									
Cross Institutional Program details									
<b>Mode of attendance</b>					<b>Career</b>				
<input type="checkbox"/> Internal					<input type="checkbox"/> Undergraduate				
<input type="checkbox"/> External					<input type="checkbox"/> Post-graduate				
<input type="checkbox"/> Mixed Mode									



<b>Section 2: Statistics</b>	
1. Are you of Aboriginal and/or Torres Strait Islander descent?	<input type="checkbox"/> Not Applicable <input type="checkbox"/> Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> Aboriginal and Torres Strait Islander
2. If you are not an Australian citizen, do you:	<input type="checkbox"/> have New Zealand citizenship (including those with permanent residency) <input type="checkbox"/> reside in Australia with a Permanent Humanitarian visa <input type="checkbox"/> have a Temporary entry permit/ visa or are a diplomat or dependant of a diplomat (except New Zealand) <input type="checkbox"/> have Permanent Resident status Date permanent residency granted: DD/MM/YYYY
3. In what country will you reside for the duration of your studies:	<input type="checkbox"/> Australia <input type="checkbox"/> Other (Please specify):
4. If you were not born in Australia, what year did you arrive: (If you have never arrived in Australia, enter '0000')	YYYY
5. Do you speak a language other than English at your home residence?	<input type="checkbox"/> Yes <input type="checkbox"/> No, English only If yes, please provide non-English language spoken most often: _____

<b>Previous education (all questions must be answered)</b>	
6. POST-GRADUATE program of any type (Higher Doctorate, PhD, Master's Preliminary or Qualifying, Postgraduate Certificate etc.):	(a) <input type="checkbox"/> Never Commenced (b) <input type="checkbox"/> Commenced but not all requirements completed (c) <input type="checkbox"/> Completed all the requirements for the award If you answered (b) or (c), please provide: Start Year: YYYY    End Year: YYYY
7. BACHELOR Degree	(a) <input type="checkbox"/> Never Commenced (b) <input type="checkbox"/> Commenced but not all requirements completed (c) <input type="checkbox"/> Completed all the requirements for the award If you answered (b) or (c), please provide: Start Year: YYYY    End Year: YYYY
8. DIPLOMA, ASSOCIATE DIPLOMA or ASSOCIATE DEGREE undertaken at a CAE, University, Teacher's College, Institute of Technology, Institute of Advanced Education or Institute of Tertiary Education:	(a) <input type="checkbox"/> Never Commenced (b) <input type="checkbox"/> Commenced but not all requirements completed (c) <input type="checkbox"/> Completed all the requirements for the award If you answered (b) or (c), please provide: Start Year: YYYY    End Year: YYYY
9. DIPLOMA, ASSOCIATE DIPLOMA or ASSOCIATE DEGREE undertaken at TAFE (Technical & Further Education) College or other VET Institution:	(a) <input type="checkbox"/> Never Commenced (b) <input type="checkbox"/> Commenced but not all requirements completed (c) <input type="checkbox"/> Completed all the requirements for the award If you answered (b) or (c), please provide: Start Year: YYYY    End Year: YYYY



10. TAFE AWARD course other than the above, undertaken at a TAFE College, CAE, Institute of Technology, Institute of Advanced Education, Institute of Tertiary Education, or other VET institution. (Do not count secondary education courses, or hobby/ recreational/ leisure or personal enrichment courses):

- (a)  Never Commenced
- (b)  Commenced but not all requirements completed
- (c)  Completed all the requirements for the award

If you answered (b) or (c), please provide:

The last year you were enrolled in that course: YYYYY

11. FINAL YEAR OF SECONDARY EDUCATION at a High School, Technical High School, Secondary School or College:

- (a)  Did not do final year
- (b)  Did final year

If you answered (b), please provide:

The year in which you completed the final year of secondary education: YYYYY

12. FINAL YEAR OF SECONDARY EDUCATION at another institution

- (a)  Did not do final year
- (b)  Did final year

If you answered (b), please provide:

The year in which you completed the final year of secondary education: YYYYY

13. OTHER QUALIFICATION or certificate of attainment or competence

- (a)  Do not have
- (b)  Do have

If you answered (b), please provide:

The year the requirements for the qualification or certification were completed: YYYYY



**Highest Qualification of Parents/Guardians**

The Department of Education, Employment and Workplace Relations (DEEWR) require universities to collect data from all students regarding the highest educational attainment of their parents/guardians.

Parent/guardian 1 and parent/guardian 2 are the people that you choose to identify in these roles.

14. Parent/Guardian 1:

**Highest educational attainment**

- Postgraduate Qualification (e.g. Postgraduate Diploma, Masters, PhD)
- Bachelor Degree
- Other post school qualification  
(e.g. associate degree, diploma, advanced diploma, completed apprenticeship, VET/TAFE certificate)
- Completed Year 12 schooling or equivalent
- Did not complete Year 12
- Completed Year 10 schooling or equivalent
- Did not complete Year 10 schooling or equivalent
- Don't know
- I do not wish to provide this information (go to question 15)

Male    Female

15. Parent/Guardian 2:

**Highest educational attainment**

- Postgraduate Qualification (e.g. Postgraduate Diploma, Masters, PhD)
- Bachelor Degree
- Other post school qualification  
(e.g. associate degree, diploma, advanced diploma, completed apprenticeship, VET/TAFE certificate)
- Completed Year 12 schooling or equivalent
- Did not complete Year 12
- Completed Year 10 schooling or equivalent
- Did not complete Year 10 schooling or equivalent
- Don't know
- I do not wish to provide this information (go to question 16)

Male    Female

**Disability/Impairment details**

16. Do you have a disability, impairment or long-term medical condition, which may affect your studies?

Yes    No

If yes, please indicate the area(s) of impairment

Hearing    Learning    Mobility    Vision    Medical    Other

I would like to receive information about University support services, equipment and facilities that may assist me, and how to access them.

**Note:** Information you provide about your disability or medical condition will be managed in accordance with the University policy on confidentiality of student's personal information.



**Section 3: Enrolment**

The Course Coordinator for each course must approve your application. For courses requiring clinical or field placements, the Course Coordinator must confirm that a place will be available for you.

Do not try to enrol online yourself, the University will process this on your behalf.

To view the course details and timetable see <http://programs.unisa.edu.au/public/pcms/home.aspx>. Please ensure that you provide the correct Enrolment class number and all related classes for each course. See example for the correct method of completing this section of the form.

**Course Example**

Study period	Subject area	Catalogue number	Description	Class type	Class number	Day	Time	
2	COMP	1009	Programming in Java 2	Lecture	23741	Mon	3-5pm	
Example Only				Related class 1	Tutorial	23591	Wed	3-4pm
				Related class 2	Practical	23595	Mon	2-3pm

**Course 1**

Study period	Subject area	Catalogue number	Description	Class type	Class number	Day	Time
				Related class 1			
				Related class 2			

Course Coordinator's name:

For courses requiring clinical or field placement, I confirm that a placement will be available for this student

Course Coordinator's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Course 2**

Study period	Subject area	Catalogue number	Description	Class type	Class number	Day	Time
				Related class 1			
				Related class 2			

Course Coordinator's name:

For courses requiring clinical or field placement, I confirm that a placement will be available for this student

Course Coordinator's signature: \_\_\_\_\_ Date: \_\_\_\_\_



<b>Course 3</b>							
Study period	Subject area	Catalogue number	Description	Class type	Class number	Day	Time
			Related class 1				
			Related class 2				
Course Coordinator's name:							
<input type="checkbox"/> For courses requiring clinical or field placement, I confirm that a placement will be available for this student							
Course Coordinator's signature:					Date:		

<b>Course 4</b>							
Study period	Subject area	Catalogue number	Description	Class type	Class number	Day	Time
			Related class 1				
			Related class 2				
Course Coordinator's name:							
<input type="checkbox"/> For courses requiring clinical or field placement, I confirm that a placement will be available for this student							
Course Coordinator's signature:					Date:		



**Section 4: Authority from Home Provider**

**Equivalent Courses / Subjects / Topics**  
Complete the part below OR submit a study plan from your home provider which authorises the cross-institutional study.

No	Code / Level	Points / Units
1		
2		
3		
4		

**Tuition fee information**

In which year did you begin your current program: **YYYY**

The University of South Australia will charge the same fee-paying status as at your home provider. Please select from the following:

<input type="checkbox"/> Fee-paying Domestic If using FEE-HELP you will need to submit the relevant CAF form.	<input type="checkbox"/> Fee-paying International If you are on a student visa, please attach a copy of your CoE.	<input type="checkbox"/> Commonwealth Supported Attach Commonwealth Assistance Notice (CAN) and submit relevant CAF form.
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**Authority from Home Provider**

This student is authorised to study the courses listed in Section 3 at the University of South Australia.  
The student will be credited for the point value(s) listed in Section 4 towards the award of:  
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University:

Staff member's name:

Position title:

Signature:	Date:
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<b>Section 5: Student Declaration</b>	
Please complete this checklist to ensure your application is complete. Incomplete applications will be returned unprocessed.	
<input type="checkbox"/>	I have carefully read the Important Information
<input type="checkbox"/>	My home provider is not Open Universities Australia.
<input type="checkbox"/>	I have completed all relevant parts of the application form
<input type="checkbox"/>	I am lodging the form within the required time frame
<input type="checkbox"/>	I have completed the enrolment sheet and obtained the necessary authorisation to enrol
<input type="checkbox"/>	I have attached evidence regarding my TAFE enrolment (if applicable)
<input type="checkbox"/>	I have attached evidence of my current student registration with the relevant registration board (if applicable)
<input type="checkbox"/>	I have attached the relevant Commonwealth Assistance Form (CAF) for the studies I am applying to do at the University of South Australia (if applicable)
<input type="checkbox"/>	I have provided my CHESSN (Commonwealth Higher Education Student Support Number) or a copy of my Commonwealth Assistance Notice.
<input type="checkbox"/>	I have attached my current Confirmation of Enrolment (CoE) (student visa holders only)
<p><b>I AGREE TO BE RESPONSIBLE FOR:</b></p> <ul style="list-style-type: none"> <li>• Withdrawing by the relevant census date for deletion of a course from my record – (form available at <a href="http://i.unisa.edu.au/campus-central/Student-Forms/Student-Forms-2/#enrolment">http://i.unisa.edu.au/campus-central/Student-Forms/Student-Forms-2/#enrolment</a>)</li> <li>• Completing the relevant prerequisite courses, where specified, before attempting higher level courses (Note that your enrolment can be cancelled in a course where the prerequisite has not been met)</li> <li>• Reading the announcements on the myUniSA student portal and my student email at least once a week, as the University's primary method of communication</li> <li>• Familiarising myself with and abiding by University statutes, by-laws and policies as listed on the University Policies webpage, and any other rules or guidelines established under the authority of the University</li> <li>• Paying University invoices in full by the due date specified</li> </ul> <p><b>I AUTHORISE THE UNIVERSITY TO:</b></p> <ul style="list-style-type: none"> <li>• Provide me with electronic notices of my enrolment liability, including the Commonwealth Assistance Notice</li> <li>• Release my personal and academic information in accordance with the Confidentiality of Student's Personal Information policy at <a href="http://www.unisa.edu.au/policies/policies/academic/A46.asp">www.unisa.edu.au/policies/policies/academic/A46.asp</a></li> <li>• Test any work submitted by me for instances of plagiarism using text comparison software. I understand this will involve the University or its contractor copying my work and storing it on a database to test work submitted by others, as described at <a href="https://lo.unisa.edu.au/mod/book/view.php?id=252142">https://lo.unisa.edu.au/mod/book/view.php?id=252142</a></li> </ul> <p>I hereby state that the information I have provided to the University is true and accurate, and I understand that the University will take appropriate action if this information is subsequently found to be incomplete, misleading or false.</p>	
Student Signature:	Date:



<b>OFFICE USE ONLY</b>	
<b>Campus Central</b>	
<input type="checkbox"/> Appropriate form and all sections complete	<input type="checkbox"/> Disability information entered by Team Leader
<input type="checkbox"/> Course Coordinator has confirmed places available for clinical / field placement courses	<input type="checkbox"/> Home CoE checked for duration
<input type="checkbox"/> Student has provided evidence of registration with relevant board for clinical / field placement courses	<input type="checkbox"/> Sent hard copy CAF to Student Finance (add 'processed' to front and sign/date)
<input type="checkbox"/> Correct CAF form provided	<input type="checkbox"/> File in lever arch file, by last name
<input type="checkbox"/> CAN from Home University	<input type="checkbox"/> Student sent confirmation including as appropriate: <ul style="list-style-type: none"> <li>• Admission letter</li> <li>• Class timetable</li> <li>• Student copy of CAF</li> <li>• Invoice</li> </ul>
<input type="checkbox"/> Authorisation from UniSA and home provider	
<input type="checkbox"/> Checked student for previous student ID number	
Comments:	
Date received:	Date processed:
Received by:	Processed by: