Application for Cross-Institutional Study
(University of South Australia domestic, international and offshore students applying to study at another institution)

This is NOT an enrolment form. If your application for cross-institutional study is approved by UniSA you will need to complete the enrolment procedure at the OTHER provider in the manner required by their admissions office. Once you have completed your cross-institutional studies, it is your responsibility to request a certified results notice or official Academic Transcript from the OTHER provider and then apply for credit at UniSA.


**LODGING YOUR APPLICATION**

Please ensure that your form has been approved and signed by your Program Director prior to enrolling in a cross-institutional course at another provider. Failure to do so may result in the course not being credited towards your current program at UniSA.

Offshore students please lodge your completed form with your partner Institution

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<thead>
<tr>
<th><strong>In person</strong></th>
<th><strong>City East</strong> Campus Central Level 3 Playford Building</th>
<th><strong>City West</strong> Campus Central Level 2 Jeffrey Smart Building</th>
<th><strong>Magill</strong> Campus Central Level 1 B Block</th>
<th><strong>Mawson Lakes</strong> Campus Central Ground Floor C Building</th>
<th><strong>Mount Gambier</strong> Regional Centre Office Wireless Road Mount Gambier SA 5290</th>
<th><strong>Whyalla</strong> Campus Central Ground Floor Main Building 111 Nicolson Ave Whyalla Norrie SA 5608</th>
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<tr>
<td><strong>By post</strong></td>
<td>University of South Australia Campus Central – (name of campus) GPO Box 2471 Adelaide SA 5001</td>
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<td><strong>By email</strong></td>
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**Part A: Personal details**

- **Student ID:**
- **Mr/Miss/Ms/Mrs:**
- **Family name:**
- **Date of birth:**
- **Contact No:**
- **Are you on a student visa?**
  - Yes
  - No

If yes, obtain a CoE from the other provider for the period you will be studying there.

**Part B: Program details:**

- **Program code:**
- **Program title:**
- **Which other provider do you wish to enrol?**

Have you ever been enrolled at this provider before?
- Yes
- No

If ‘yes’, provide your student ID number for the other provider:

**Part C: Enrolments**

Enter the courses you wish to study at the other provider below. Enter the equivalent UniSA courses following your Program Director’s advice.

<table>
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<tr>
<th>No.</th>
<th>Course ID</th>
<th>Name of course</th>
<th>Unit value</th>
<th>Subject Area</th>
<th>Catalogue Number</th>
<th>Name of Course</th>
<th>Unit Value</th>
<th>Approved Yes/No</th>
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**Part D: Authority to study**

**Authorisation from other provider**

This student is authorised to study the subjects/courses listed above

- **Staff member’s name:**
- **Staff member’s position:**
- **Signature:**
- **Date:**

**UniSA Program Director Declaration**

This student is authorised to enrol in the subjects/courses listed above and upon successful completion will be eligible for credit at UniSA for the equivalent courses.

- **Program Director’s name:**
- **Program Director’s signature:**
- **Date:**

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**CAMPUS CENTRAL USE ONLY**

Received by: Date: Processed by: Date: