

COURSE TRANSFER APPLICATION



Application Deadline:

Study Period 51: 7 December; Study Period 52: 4 April; Study Period 53: 2 August

Applications received after these dates may not be approved to commence in the upcoming study period

A non-fundable administration fee of S\$214 (nett) will be charged for every application

1. PERSONAL DETAILS

Student number (8 digit number) : Nationality :
Family name : Given name :
Are you below 18 years old: Yes No Parents authorization:
Email address (JCU email ID) @my.jcu.edu.au
Contact no. :

2. COURSE INFORMATION

Current Course & Major

Course title : Major :
Are you required to show cause for this course? (please tick where appropriate) Yes No
If yes, have you submitted a Statement of Reason form? (please tick where appropriate) Yes No

Proposed Course

Course title : Major :

Study Period to take effect from

Study Period : Year :
(please select from the drop-down list)

3. DECLARATION

I declare that the information provided is true and accurate to the best of my knowledge and that I have not wilfully suppressed any information. I understand that information contained in this form is collected for enrolment and administrative purposes, and that some information may be released for administrative purposes. Personal information will not be passed onto any other external bodies without prior authorisation unless a valid legal request has been made.

Student's signature: Date (dd/mm/yyyy):

IMPORTANT

Please note that applications submitted after the above due date MAY NOT be processed in time for the upcoming Study Period.

4. RETURN DETAILS

Please complete the form electronically and email the completed form to studentservices-singapore@jcu.edu.au for processing. Do ensure that all the required fields are duly completed. Incomplete form will delay the process of your application.

Note: No hardcopies form will be accepted and processed.

5. QUALIFICATION INFORMATION BY STUDENT SERVICES

The student submitted a new highest qualification, comparing with the previous assessment.

- No. Please proceed to step 6.
 Yes. Please provide more details. Highest qualification/s: _____
 Seeking Credit Exemption: Attached copies of subject details for which credit exemption is requested*
 Sighted the original/notarised certificate and transcripts
 English Language: JCUS Placement test IELTS score _____ TOEFL _____ Other _____

<input type="checkbox"/> ELPP Entry level: _____	Comments _____
<input type="checkbox"/> Existing qualification/s: _____	
<input type="checkbox"/> University / Institute listed/not listed in AEI/UK Naric.Details: _____	
<input type="checkbox"/> Work History to be considered as one of the entry criteria.	
<input type="checkbox"/> Provided original Certified Copies of the reference letter/s from the employer/s	

Processed by Senior Executive / Executive, Student Management:	Date:
---	--------------

6. RECOMMENDATION BY HEAD OF ACADEMIC / ASSOCIATE DIRECTOR

<input type="checkbox"/> Accepted for _____ program with the following details :
<input type="checkbox"/> Number of subjects required to study: _____ <input type="checkbox"/> Duration : _____
<input type="checkbox"/> Subjects exempted (if any): _____

<input type="checkbox"/> Direct Entry, specify reasons: _____
<input type="checkbox"/> Conditional Offer – (<input type="checkbox"/> ELPP level is subject to the second placement test on Campus) (<input type="checkbox"/> Upon fulfilling the English language requirements) (<input type="checkbox"/> Upon sightings of original/notarized certificate and transcripts)
<input type="checkbox"/> Remarks: _____

<input type="checkbox"/> Rejected Remarks: _____ Recommended to: _____

Name and signature of Associate Director Admissions, Enrollments, Examinations and Student Systems:	Date:
--	--------------

7. APPROVAL BY CAMPUS DEAN

<input type="checkbox"/> Rejected	<input type="checkbox"/> Recommended to _____
<input type="checkbox"/> Accepted with conditional offer for _____ program. Please indicate condition(s): _____	
<input type="checkbox"/> English Language Preparatory Program. Levels to be completed : _____	
<input type="checkbox"/> Accepted with unconditional offer for _____ program. Number of subjects: _____	

Name and signature of Campus Dean: _____	Date : _____
---	---------------------

8. ACTIONS TO BE TAKEN BY STUDENT SERVICES

<input type="checkbox"/> Change of fee plan	<input type="checkbox"/> Re-generation of contract
<input type="checkbox"/> Other, please specify: (Example: Re-module subjects details) _____	

Contract checked for compliance and completeness: (Name and signature)	Date:
--	--------------