

Swinburne University of Technology Sarawak Campus Application Form for Admission

SECTION A: PERSONAL DETAILS

Representative/agent stamp

SWINBURNE
UNIVERSITY OF
TECHNOLOGY
SARAWAK CAMPUS

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If previously enrolled at	Swinburne Univers	ity of Technolc	ogy, please state	ID number	(Swinburne ID number)
PRINT YOUR NAME AS I	APPEARS IN YOU	R NRIC/PASSP	ORT. Please use I	BLOCK LETTERS.	All fields must be complet
Title: (Mrs, N	liss, Ms, Mr etc)	Gender:	emale Male	e Date of birth:	: Day Month Yea
Family name: (as indicated in NRIC/passport)					
Given names: (leave spaces between names)					
Email address: (for applicant)		E APPLICATION			INFORMATION REGARDING T APPLICANT OR SWINBURNE
Postal address:	Number/street				
Residential address:	Country			Post	
should not be the same as your agent)	Number/street				
	State/town/city				
	Country				tcode
Telephone: Do you have any medic					No
Note: this is for support purposes	only and will not affect the	outcome of your a	oplication.		
Have you been granted					ame:
eg. Yayasan Sarawak Scholarship Country of citizenship: _	Loans, PTPTN, Higher Ed		san Tunku Abdul Rahn Submission Ic	man, etc.	
Country of birth:		Bace:	(What country were	e you in when you subm	
-	Passport number				
(for Malaysian students only)	(for International student	s only)	Passport exp	iry date:	/ / Month Year
FOR INTERNATIONAL S	TUDENTS ONLY			Day	
Do you hold a valid Mala	aysian visa? 🗌 Ye	s 🗌 No			
If yes, type of visa:			Visa expiry da		Ionth Year
SECTION B: COURSE F	REFERENCES			Day M	1onth Year
Course preference				In	itake Year
eg. Bachelor of Business				Fei	bruary 2008
2					

SECTION C: ENGLISH LANGUAGE PROFICIENCY

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	

_____ Result: _____

Test type: ____

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(eg. IELTS, MUET, TOEFL, SPM, 1119)

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

Condition: _

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	Application fee of RM100, non-refundable (Malaysian students only)
Course or unit (subject) syllabus outlines if applying for credit transfer	Passport size photos 7 copies (blue backgrour (International, West Malaysian and Sabahan students)
English proficiency test results	One set (all pages) passport (International, West Malaysian and Sabahan students only)
Birth certificate and identity card (IC) (Malaysian students only)	Original medical report from country of origin (International students only)
 Applicant's declaration 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. I acknowledge that failure to disclose my academic record may result in the University revoking an offer or terminating my studies at any stage. 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. 	 I understand that at the time of enrolment I will be required to supply originals of all documents used to support this application. I acknowledge that the University reserves the right to alter any course, subject, admission requirement or fee without prior notice. 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. I understand that the acceptance of this application is at the absolute discretion of the University.
OFFICE USE ONLY	SEND APPLICATION TO:
Application fee paid? Yes No OR No. Course offered:	Swinburne University of Technology Sarawak Campus Business Development & Communications Department Jalan Simpang Tiga 93350 Kuching Sarawak Malaysia

Fax: +60 82 428 353

www.swinburne.edu.my

Email: study@swinburne.edu.my

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