



## GRADUATE STUDIES OFFICE

### Progression Form for Students completing Preliminary Program (NOT to be used by International students)

#### 1. INSTRUCTIONS

1. Print CLEARLY in block letters using blue or black pen.
2. Complete all sections of the application.
3. Return the completed application form with a copy of Graduate Studies Office notification to:  
 Graduate Studies Office  
 Faculty of Business and Economics  
 Building E4A, Room 217A, Macquarie University NSW 2109

Please note: **Faxed** applications or documents are NOT acceptable.

#### 2. STUDENT IDENTIFICATION

Your UAC Application number

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Have you ever applied to or been enrolled at Macquarie University before?       Yes       No

IF YES, indicate: Year(s) \_\_\_\_\_ Course \_\_\_\_\_

Your Macquarie University student identification number? (if known)

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#### 3. PERSONAL DETAILS

Title:  Mr       Miss       Mrs       Ms       other \_\_\_\_\_

Family Name: \_\_\_\_\_ Other Names: \_\_\_\_\_

Preferred Name: \_\_\_\_\_  Male       Female

Date of Birth (dd/mm/yyyy): \_\_\_\_\_ Occupation: \_\_\_\_\_

Contact Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Home phone: (    ) \_\_\_\_\_ Work phone: (    ) \_\_\_\_\_ Fax No.: (    ) \_\_\_\_\_

Mobile phone: \_\_\_\_\_ Email address: \_\_\_\_\_

#### 4. COURSE DETAILS

Course code (please tick one)	Course name in full
<input type="checkbox"/> MCOM;BUS	Master of Commerce in Business
<input type="checkbox"/> MCOM;MKTG	Master of Commerce in Marketing
<input type="checkbox"/> MCOM;IST	Master of Commerce in Information System and Technology
<input type="checkbox"/> MCOM;ISTMIT	Master of Commerce in Information System and Technology with Master of Information Technology
<input type="checkbox"/> MIB	Master of International Business
<input type="checkbox"/> MIB – City Campus	Master of International Business (City Campus)
<input type="checkbox"/> MIBMA;INTCOM	Master of International Business with Master of Arts in International Communication
<input type="checkbox"/> MIB;MIR	Master of International Business with Master of international Relations

To Begin: (tick one)       Semester 1 (February)       Semester 2 (August)      Year: 200\_\_\_\_\_

Study Mode (tick one)       Full-time on campus       Part-time on campus

## 5. CITIZENSHIP / RESIDENCY DETAILS

a. Please indicate your citizenship/residency status by ticking **ONE** of the following:

- I am an Australian Citizen. Please complete Questions c – g and attach a certified copy of one of the following: Australian Birth Certificate, Australian Citizenship Certificate or Australian passport.
- I am a New Zealand Citizen. Please complete Questions c – f and attach a certified copy of one of the following: New Zealand Birth Certificate, New Zealand Citizenship Certificate or New Zealand passport.
- I hold an Australian Permanent Resident Visa (other than Humanitarian sub-class). Please complete Questions b - f
- I hold an Australian Permanent Resident Humanitarian Visa. Please complete Questions b – g

**If you have not selected one of the options as listed above, you should apply as an International Student. Please contact Macquarie International on 9850 6320 for further information.**

b. For holders of Australian Permanent Resident or Australian Permanent Resident Humanitarian Visas please complete the following:

- i. On what date was your Visa granted? \_\_\_\_\_ (dd/mm/yyyy)
- ii. If the Visa was granted before you entered Australia, please give the date when you first entered Australia as a Permanent Resident. \_\_\_\_\_ (dd/mm/yyyy)

Please attach a certified copy of your visa and (if relevant) the page in your passport showing the date when you first entered Australia as a permanent resident.

c. Will you be residing in Australia during the study period ?

d. In which country were you born ? (Please specify) \_\_\_\_\_

e. If you were not born in Australia, in what year did you first enter Australia ? \_\_\_\_\_

c. Will you be residing in Australia during the study period ?  Yes  No

d. In which country were you born ? \_\_\_\_\_

e. If you were not born in Australia, in what year did you first enter Australia ? \_\_\_\_\_

f. What is the main language spoken at your permanent home residence ? \_\_\_\_\_

g. Are you Aboriginal ?  Yes  No or Torres Strait Islander origin ?  Yes  No or  both  No

## 6. DISABILITY, IMPAIRMENT OR LONG TERM MEDICAL CONDITION

No known impairment OR Please indicate any area(s) of impairment \_\_\_\_\_

**If you require support services based on your disability or health condition, please contact the Equity Support Unit (ESU) prior to the commencement of your studies. Phone: 02 850 7497 or Email: equity@mq.edu.au**

Please indicate any support requirements:

Support needs / equipment needs (specify) \_\_\_\_\_

## 7. APPLICATION FOR CREDIT/EXEMPTION

Do you wish to apply for credit or exemptions based on previous relevant study?  Yes  No

**If yes, please complete a Credit for Previous Studies Request Form (CPS form ). You can obtain this from either SES (Student Enquiries Service - Level one Lincoln Building) Or Download it from <http://www.postgrad.mq.edu.au/forms.html>**

## 8. HIGH SCHOOL STUDIES

Did you attend Year 12 in Australia ?  Yes  No

**If YES, please provide information of your Year 12 studies**

State where attended	Name of High School	HSC Year	Year 12 Student Number (if known)

## 9. TERTIARY STUDIES

Duration From Year To Year	Name of Tertiary Institution (and country if not in Australia)	Name of Course Studied (Please indicate Full-time or Part-time Attendance)	Class/Grade (Hons.only)	Completed YES / NO	Date of Completion (or Expected Date of Completion)

**10. DETAILS OF OTHER QUALIFICATIONS HELD (e.g. Membership of professional bodies, certificates held)**


**11. DETAILS OF PROFESSIONAL EXPERIENCE (relevant to proposed study)**


**12. DECLARATION AND SIGNATURE**

I wish to apply for the course/s listed and declare that the information I have submitted is true and complete. I understand that Macquarie University reserves the right to vary or reverse any decision made on the basis of incorrect or incomplete information.

I understand that while the supply of information is voluntary, if I cannot provide or do not wish to provide the information sought, it may be impossible to process my application.

I understand that in submitting this application, Macquarie University is collecting personal information from me, and that this is considered personal information for the purposes of the Privacy and Personal Information Protection Act 1998. I understand that the purpose for collecting the information is to enable my application to be considered, to plan the provision of educational courses, and that the intended recipients of this information are officers within Macquarie University and any other body who may require the information for administration purposes, including agencies of the Federal Government.

Macquarie University is collecting the information in this form for the purpose of assessing my entitlement to Commonwealth assistance under the Higher Education Support Act 2003 and allocation of a Commonwealth Higher Education Student Support Number (CHESSN) to me. I understand that Macquarie University may disclose the information to the Department of Education, Employment and Workplace Relations (DEEWR) for those purposes, that DEEWR will store the information securely in the Higher Education Information Management System (HEIMS) and that DEEWR may disclose the information to the Australian Taxation Office (ATO). Macquarie University and DEEWR will not otherwise disclose the information without my consent unless required or authorised by law.

I authorise Macquarie University to collect, receive, store, transfer and use any information about me from the Universities Admissions Centre and/or other tertiary institutions to facilitate the processing of my application.

Name	Signature	Date

**GSO Use only**

**Decision** (Offer or Reject)      Is the course offered different to the course the applicant applied for?     Yes     No  
 If Yes, please specify the course offered:

If you wish to make an offer under **RULE 2(3)** (no recognised degree or no recognised English proficiency qualification), **set out your reasons here.**

Name of Dean (or nominee):	Signature of Dean (or nominee):