# Application for Admission – Auditing Participant 2024

*Auditing participants are registered through the standard admission process and their details are stored in the database of the University of Divinity to facilitate access to the ARK online Learning Management System. Auditing participants must therefore agree to abide by the University’s* [*code of conduct*](https://divinity.edu.au/code-of-conduct/) *– see Terms and Conditions of Enrolment and Declaration. It is recommended that you submit your application at least two weeks before your intended semester (or unit) start date. Late applications may not be accepted. Please provide all relevant supporting documents. An incomplete application will delay processing.*

## Personal Information

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Personal details | | | | | | | | | | | | | | | | | | | | | | | |
| Title | | | |  | | | Suffix (if any) | | |  | | | | Previous family name | | | | | | | | |  |
| Family name | | | |  | | | | | | | | | | Given first name | | | | | | | | |  |
| Given middle name(s) | | | |  | | | | | | | | | | Preferred given name | | | | | | | | |  |
| Have you previously been a University of Divinity or Melbourne College of Divinity student or applicant? | | | | | | | | | | | | | |  | | Yes | | College | | | | |  |
|  | | | | | | | | | | | | | |  | | No | | | | | | | |
| *Office Use Only* | | UD ID | | | | | |  | | | | | | | | College/School ID | | | | | | |  |
| Contact details | | | | | | | | | | | | | | | | | | | | | | | |
| Email *(\*required) (\*required)* | | | |  | | | | | | | | | | | | | | | | | | | |
| Mobile phone | | | |  | | | | | | | | | | | | Day phone | | | | | | |  |
| Home phone | | | |  | | | | | | | | | | | | | | | | | | | |
| **Residential address -** *Address where you reside or will be residing when undertaking your study. No PO Box.* | | | | | | | | | | | | | | | | | | | | | | | |
| Address line 1 | | | |  | | | | | | | | | | | | | | | | | | | |
| Address line 2 | | | |  | | | | | | | | | | | | | | | | | | | |
| Town/Suburb | | | |  | | | | | | | | | | | | Postcode | | | | | | |  |
| State | | | |  | | | | | | | | | | | | Country | | | | | | |  |
| Additional personal details | | | | | | | | | | | | | | | | | | | | | | | |
| Date of birth | (dd/mm/yyyy) | | | | | | | | | | | | | | | | | | | | | | |
| Gender |  | | Male | | | | | |  | | Female | | | | | |  | | | Indeterminate/Intersex/Unspecified | | | |
| Occupation (optional) | | | | |  | | | | | | | | | | | | | | | | | | |
| Denomination (optional) | | | |  | | | | | | | | | | | | Diocese/Congregation | | | | | | |  |
| Feedback | | | | | | | | | | | | | | | | | | | | | | | |
| How did you hear about us? | | | | |  | | | | | | | | | | | | | | | | | | |
| Emergency contact | | | | | | | | | | | | | | | | | | | | | | | |
| Full name |  | | | | | | | | | | | | Relationship to you | | | | | |  | | | | |
| Day phone |  | | | | | | | | | | | | Mobile phone | | | | | |  | | | | |
| Australian Government Information | | | | | | | | | | | | | | | | | | | | | | | |
| Are you of Australian Aboriginal descent? | | | | | | | | | | | |  | | | Yes | | | | | |  | No | |
| Are you of Torres Strait Islander descent? | | | | | | | | | | | |  | | | Yes | | | | | |  | No | |
| Is English your first language? | | | | | | | | | | | |  | | | Yes | | | | | |  | No | |
| *Applicants whose first language is* ***not*** *English, please complete the following section* | | | | | | | | | | | | | | | | | | | | | | | |
| Have you already studied in English? | | | | | | | | | | | |  | | | Yes | | | | | |  | No | |
| Country in which you were born | | | | | |  | | | | | | If not born in Australia, year of arrival | | | | | | | | |  | | |
| Language spoken at your permanent residence | | | | | |  | | | | | | | | | | | | | | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Temporary residents (Visa holders)  \* *NOTE: Audit participation is* ***not*** *available to overseas students in Australia studying on* [*Overseas Student Visas*](https://immi.homeaffairs.gov.au/visas/getting-a-visa/visa-listing/student-500/length-of-stay) *(500 subclass)* | | | | |
| Are you an Australian [temporary visa](https://immi.homeaffairs.gov.au/visas/getting-a-visa/visa-listing/student-500/length-of-stay) holder? |  | Yes |  | No |
| Are you going to reside in Australia (onshore) while being an Auditing participant? |  | Yes |  | No |
| What is your Visa category? *(or subclass number)* |  | | | |
| Visa expiry date *(if any)* | (yyyy) | | | |

## Medical/Disability Needs

If you have a disability or medical condition which means that you may require additional help during your study, it is important to provide the following information. This information will be kept confidential and will not affect your admission to the University.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Do you have a disability, impairment and/or long-term health condition that may affect your studies? | | | |  | | Yes | |  | | No | | | |
| If you answered ‘Yes’ to the above question, please indicate the area/s. | | | | | | | | | | | | | |
|  | Hearing |  | Mobility/Physical | |  | | Intellectual | |  | | Learning | | |
|  | Mental Health |  | Brain injury | |  | | Vision | |  | | Medical | | |
|  | Neurological |  | Other: | | | |  | | | | | | |
| Would you like to receive information on medical/disability support services, equipment or facilities available that may assist you? If yes, please complete [Student Support Plan](https://divinity.edu.au/documents/student-support-plan/) and submit it together with this Admission Form to your Course Advisor. | | | | | | | |  | | Yes | |  | No |

## Previous Education

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Secondary school education | | | | | | | |
| Highest secondary schooling level attained (level) |  | | Year highest secondary schooling was attained | | | (yyyy) | |
| Language in which secondary schooling was studied | | |  | | | | |
| Tertiary education *Please list in chronological order starting with highest award.* | | | | | | | |
| Award Name | Name of institution | Country | | Year completed  (yyyy) | Language | | Transcript provided? |
|  |  |  | |  |  | |  |
|  |  |  | |  |  | |  |

\* *NOTE: Provision of transcripts is optional when enrolling as an audit participant*

## Proposed program of study and Attendance Mode

Please complete this section in collaboration with your Course Advisor.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Study mode | | | | | | |
| Audit undergraduate units (AudUG) |  | Audit postgraduate units (AudPG) |  | Audit HDR | |  |
| Study load |  | Full-time |  | Part-time | | |
| Contact mode |  | In-Person (on campus) |  | Online  only |  | Mixed  Mode |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sem 1 units** | **Sem 2 units** | Codes | **Units** | **Colleges/Schools teaching the units** | **Delivery Modes** | **Delivery ID**  **(Office Use)** |
|  |  | IS2002M | Aboriginal Cultures and Spirituality |  |  |  |
|  |  | IS3041W | Indigenous Rights and the Legacies of the Bible |  |  |  |
| For information about these units, please visit <https://units.divinity.edu.au/units/public/all/all/SIS/all>  For information about the School of Indigenous studies, please visit <https://divinity.edu.au/university/school-of-indigenous-studies/> | | | | | | |

## Tuition fees

### Auditing Participants (summary):

Please note:

* If Students are curious to learn about some of UD unit offerings, they are welcome to access our learning environment as an Auditing Participants (on a **not-for-credit basis**).
* An Auditing Participants is one who has paid a nominal fee to attend and observe a particular unit. In other words, they are observers, learning from, but not actively participating in the classroom experience.
* *Auditing Participants are not classified as members of UD, thus don’t receive a UD ID card. However, they are obligated to act in line with UD Code of Conduct (*[*Regulation 9*](https://divinity.edu.au/about/governance/the-act-and-regulations/)*) and Privacy Act.*
* The price for a standard unit offered by the University of Divinity is $500 (per unit).
* All tuition fees are to be paid prior to the commencement of the auditing units.
* Please note that tuition fees will vary from year to year.
* Audit fees charged by the University of Divinity do not include GST.
* FEE-HELP (the Australian Government loan scheme) is **not** available for audit fees.
* Audit participation is **not** available to overseas students in Australia studying on [Overseas Student Visas](https://immi.homeaffairs.gov.au/visas/getting-a-visa/visa-listing/student-500/length-of-stay) (500 subclass).

### Method of payment

How will you pay your tuition fees?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Upfront payments only:** | | | | | | |
|  | **Credit card**  To pay by Visa or Mastercard, please go to [our website](https://pay.divinity.edu.au/payments/fee/tuition/) and follow the instructions or call 03 9853 3177.  A non-refundable surcharge fee of 1.80% applies for all card payments. | | | | | |
|  | **Direct Deposit** *(please include your Student ID or Full Name for reference)* | | | | | |
| Bank details | | | ANZ Banking Group (Australia & New Zealand Banking Group Limited) | | |
| Account Name | | | University of Divinity | | |
| BSB | | | 013345 | | |
| Account Number | | | 304361518 | | |
| Amount | | | $ 500 (payable to: University of Divinity) | | |
|  | A **third party/sponsor** is paying for my tuition fees. | | | | | |
|  | I include with this application a [Domestic Student Sponsor Statement](https://www.divinity.edu.au/documents/domestic-student-sponsor-statement/), letter or other official confirmation from the third party accepting responsibility for payment of my fees. | | | | |
| Name of third party/sponsor |  | | | |
| Address of third party/sponsor |  | | | |
| Contact name |  | | | |
| Contact email |  | | | |
|  | Cheque/money order enclosed | | | | Amount | $       (payable to: University of Divinity) |

## Student’s checklist

Important checklist to avoid delays in processing your application. Tick the boxes when you have completed the necessary steps.

|  |  |
| --- | --- |
|  | Provide **certified** copies of your birth certificate, current passport or other official documents verifying your citizenship status **in your current name**. |
|  | Complete **payment details** on form |
|  | Read and sign the declaration |
|  | Make a copy of your application for your records |

## Terms and Conditions of Enrolment and Declarations

### Privacy statement

The information on this form is collected for the primary purpose of assessing your application or re-enrolment. Other purposes of collection include the creation of a record on the student database, attending to administrative matters, corresponding with you, and statistical analyses. If you choose not to complete all the questions on this form, it may not be possible for the University of Divinity to assess your application or re-enrolment. All sensitive and personal information will be handled in accordance with the University’s Privacy Policy. Personal information may be disclosed to authorised bodies and the permitted purposes for which such personal information may be used, as authorised by the Higher Education Support Act 2003. For details of the privacy and collection statement that applies to this form, please go to <https://divinity.edu.au/privacy>.

You have a right to access personal information that the University of Divinity holds about you, subject to any exceptions in relevant legislation. If you wish to seek access to your personal information or inquire about handling of your personal information, please contact the University of Divinity at [enquiries@divinity.edu.au](mailto:enquiries@divinity.edu.au).

### Declaration and signature

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | I declare that the information provided by me is true and correct in every particular. I understand that if I have misrepresented my details in any way, then the University of Divinity may terminate any candidacy offered to me that arises as a result of this application. | | | |
|  | I accept responsibility for notifying the University of Divinity office of any change of address or email. | | | |
|  | I accept responsibility for ensuring that the audit fees for all the University of Divinity units in which I enrol are paid on time. | | | |
|  | I agree to abide by the University of Divinity’s [*Code of Conduct*](https://divinity.edu.au/code-of-conduct/) | | | |
|  | I understand that, by enrolling as an auditing participant, **I cannot claim academic credit** for completion of the unit(s), either in the current study period or retrospectively. | | | |
|  | I consent to receiving information electronically from the University, acknowledging that email is the default method of written communication and that a valid email address is required in order to access the ARK (online Learning Management System). | | | |
|  | I consent to my data being used by the University in accordance with the Information Privacy Principles (IPPs) in the Privacy and Data Protection Act 2014 (Vic) and Privacy Act 1988 | | | |
|  | I understand that I will be required to have regular access to a computer that supports video and other standard computing software during my studies, and that multi-modal learning implies travel at my own expense. | | | |
| Applicant’s signature | |  | Date | **/**  **/** |
| Type name for electronic submission |

## Course Advisor checking and approval *(Office use only)*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***Approval*** (Course Advisor to complete)  I have checked this student’s application for admission, and confirm that  interview was conducted with applicant  certified evidence of citizenship status in current name is enclosed (passport, birth certificate, etc…)  all units are running in the time periods indicated  applicant name, ID and payment method are indicated in Tuition Fees section. Cheque/money order is attached (if this is the payment method)  ***Approval***  This applicant:  meets all criteria for admission and is permitted to audit the units selected in the Study Program above  does not meet the criteria for admission because:   |  | | --- | |  | | | | | | |
| Course Advisor |  | Signature |  | Date | **/**  **/** |
| ***OVC Office Administration***  Form checked, data is complete and matches evidence  Data entered in Paradigm  Student contacted | | | | | |
| Name |  | Signature |  | Date | **/**  **/** |