

UOW ADMINISTRATION

Application for Cross Institutional Study at another University

INSTRUCTIONS

CLOSING DATE: Please consult with the host institution regarding application deadlines.

1. Obtain an Enrolment Record Print from (SOLS or Student Central) and attach it to this form.
2. Obtain Subject Description(s) from the Host University and attach it to this form.
3. Seek approval from the relevant Head of the Academic Unit.
4. Seek approval from the Head of Student (HOSt) / Assoc Dean of the Faculty in which you are enrolled.
5. Return the completed application plus Enrolment Record and Subject Description(s) to the relevant Faculty Central.

BUSINESS	LEVEL 1, BUILDING 40
EIS	GROUND LEVEL, BUILDING 4, ROOM G12
LHA	LEVEL 1, BUILDING 19
SMAH	STUDENTHUB 41 MAIN FOYER, BUILDING 41
SOC	EDUCATION - BUILDING 23 G21
	PSYCHOLOGY AND HEALTH AND SOCIETY - STUDENTHUB 41 MAIN FOYER, BUILDING 41

6. Approved Cross Institutional students will be sent an Approval Letter to the address listed on this form.

PLEASE NOTE:

If this is your final session of study you may not be able to graduate if your official transcript is not received by the due date listed on your approval letter. Please check with your Host University on the release date for their official transcripts as this may be different to the result release date.

** You need to supply an original official transcript, or a certified copy of the original transcript (scanned copies cannot be accepted).*

The official transcript can be sent to the following address:

University of Wollongong
Student Central, Building 17
Northfields Avenue
WOLLONGONG, NSW 2522

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PERSONAL DETAILS		
Student Number:	First Name:	Last Name:
Date of Birth:	Telephone:	Email:
Address:		Course Code:
Course Name:		Major:
HOST UNIVERSITY NAME:		

PLEASE DETAIL THE SUBJECTS TO BE STUDIED CROSS INSTITUTIONALLY

SUBJECT CODE	SUBJECT NAME	COMMENCEMENT DATE

REASON FOR APPLICATION

I acknowledge that I have read and accepted the conditions outlined in this form:

Student signature:	Date:
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Specified credit to be granted at the University of Wollongong		
SUBJECT CODE	SUBJECT NAME	RECOMMENDATION BY

Unspecified Credit points to be granted at the University of Wollongong				
100 LEVEL=	200 LEVEL=	300 LEVEL=	400 LEVEL=	900 LEVEL=
Approval: YES / NO			Date:	
Approver's Name:			Approver's Signature:	
Approver's Position:*				