



Semester 1 2010

HONOURS CONVERSION APPLICATION

CLOSING DATE: Friday October 30th

Late Round Closing Date: Friday February 13th 2010

Name: _____

I am applying for Honours in: _____
(discipline/subject area)

My completed degree is: _____

To be completed by Chair of Department/Head of School/Honours Coordinator

Recommended

Not Recommended

 Signature CoD/HoS/Coordinator

 Print Name

 Date

Does the applicant meet the pre-requisites? Yes No

If no, please give reasons for recommending admission:

With this application you must provide:

- a completed application form
- University of Sydney departmental recommendation (above)
- an original or certified copy of your academic transcript (Faculty of Arts office staff can certify copies) (not required of University of Sydney graduates)
- proof that you are an Australian citizen or permanent resident of Australia (not required for University of Sydney graduates)
- proof of fee status from undergraduate degree (eg: HECS, Local Fee-Paying, FEE-HELP) (not required for University of Sydney graduates)
- if still currently enrolled as an undergraduate at another institution, written confirmation from your institution of expectation of completion of the BA requirements at the end of semester 2 2009

INCOMPLETE APPLICATIONS WILL NOT BE ASSESSED



The University of Sydney

Faculty of Arts

Main Quadrangle, University of Sydney NSW 2006
 Ph: (02) 9351 3129 Fax: (02) 9351 2045
 Email: arts.ug@usyd.edu.au

PERSONAL DETAILS: *Please complete all applicable details*

Title: _____ Surname: _____ Given Names: _____

Gender: _____ Date of Birth: _____ Student Number: _____
(if previously enrolled at the University of Sydney)

Previous Names (attach documentary evidence): _____

Postal Address: _____

Suburb: _____ State: _____ Postcode: _____

Email Address*:

**Notification of the outcome of your application will be via email - please print clearly*

Mobile: _____ Other phone: _____

RESIDENCY: Please select the appropriate box regarding your residency status

Are you currently a: Australian Citizen? New Zealand Citizen?

Permanent Resident of Australia? Current USyd International Student?

If you are a permanent resident of Australia, please indicate the date your visa was granted (if it was granted in Australia) otherwise, the date you landed in Australia with this visa: _____

Please note that all NEW applicants must provide the following documentary evidence of this information: a certified copy of your birth certificate OR certified copies of relevant pages from your passport.

Completed Tertiary Qualifications:

Qualification	Class of Honours (if any)	Date(s) of Graduation	Institution Awarding the Qualification

If any of your qualifications are **not from the University of Sydney**, attach an original transcript of your academic record to this application. If a qualification has not been conferred at the time of application, the transcript must state that you are eligible for the award of the qualification and likely date of conferral. If any document is not in English an official translation must be provided.



EXCLUSION:

Have you ever been:

YES NO

- (a) excluded or suspended for any reason from a course at a University or other institution?
- (b) asked to show cause why your enrolment in any course should not be suspended or terminated?
- (c) asked to explain unsatisfactory progress in any course?

Please indicate the ATSI category that applies to you:

- Neither Aboriginal nor Torres Strait Islander Of Torres Strait Islander origin
- Of Aboriginal origin Of Aboriginal and Torres Strait Islander origin

DECLARATION:

I declare that the information submitted is correct and complete, and I understand that the University may obtain official records from any university of other tertiary institution previously attended by me. I understand that the University reserves the right to vary or reverse any decision made on the basis of incorrect or incomplete information. ***I understand that this is not an enrolment form, rather an application to apply for admission. I understand that if the information requested is not provided my application will not be considered.***

Signature: _____ Date: _____

Faculty Office use only			
APPROVED	<input type="checkbox"/>	NOT APPROVED	<input type="checkbox"/>
_____ Signature of Faculty Office		_____ Date	
DEGREE CODE	<input type="text"/>	DEPARTMENT CODE	<input type="text"/>
HECS CODE	<input type="text"/>	ENROLMENT FORM ORDERED	<input type="text"/>
INITIAL	<input type="text"/>		