Please complete this form along with: signed copy of your offer letter, payment form (if relevant), and a proof of your Health Insurance (if relevant) and return to: [inbound@adelaide.edu.au](mailto:inbound@adelaide.edu.au)

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| **Program Acceptance** | | | | | | | | | | | | | | | |
| I wish to accept the University of Adelaide offer of admission to undertake a course of study as an international Exchange student throughout the following period: | | | | | | | | | | | | | | | |
| **Study Period** | | | | | | | | **Dates** | | | | | | | **Please Tick** |
| Winter School 2015 | | | | | | | | June – July | | | | | | | Yes  No |
| Winter School + Semester 2 2015 | | | | | | | | June - December | | | | | | | Yes  No |
| Semester 2 2015 only | | | | | | | | July – December | | | | | | | Yes  No |
| Full year - Semester 2 2015 and Semester 1 2016 | | | | | | | | July – July | | | | | | | Yes  No |
| **Please note the following dates when booking flights:** <http://www.adelaide.edu.au/student/dates/> | | | | | | | | | | | | | | | |
| **Essential Information for Visa Application (this section must be completed)** | | | | | | | | | | | | | | | |
| Your Confirmation of Enrolment (eCOE) will be forwarded electronically to the Australian Diplomatic Mission which you nominate below. A copy will be emailed to you at the email address supplied by you below. | | | | | | | | | | | | | | | |
| Mr Mrs Ms Miss | | | Family / Surname: | |  | | | | | | | | | | |
| Given Names: | |  | | | | | | | | | Sex: | | Male  Female | | |
| Citizenship: | |  | | | Country of Birth: | | | |  | | | | | | |
| Date of Birth: | | Day: |  | Month: | |  | | | | Year: | | | |  | |
| Your email address: | | |  | | | | | | | | | | | | |
| I will submit my on-line Student Visa application at the following Australian Diplomatic Mission:   * Outside Australia (you are at home when applying for your student visa) * In Australia (you are already in Australia when applying for your student visa) | | | | | | | | | | | | | | | |
| Please consult the Department of Immigration and Border Protection (DIBP) webpage for the exact locations: <http://www.immi.gov.au/contacts/overseas/> | | | | | | | | | | | | | | | |
| City: |  | | | | Country: | |  | | | | | | | | |
| **Fee Payment** | | | | | | | | | | | | | | | |
| Please complete and return the Payment form below as soon as possible along with this form. Please note that your Confirmation of Enrolment (eCOE) cannot be issued until we receive full payment of the required fees:   * Tuition: Exchange students do not pay tuition to the University of Adelaide * Overseas Student Health Cover (OSHC): Required for all Exchange students | | | | | | | | | | | | | | | |
| **Exceptions to OSHC – only relevant for students from Belgium, Norway and Sweden:**  **Belgium and Norway:** I have attached a valid health insurance comparable to OSHC through the reciprocal arrangements between the Norwegian, Belgian and Australian Governments for the duration of my Student Visa  **Sweden:** I have attached a valid CSN International or Kammarkollegiet Health Insurance policy for the duration of my Student Visa | | | | | | | | | | | | | | Yes  No  Yes  No | |
| **Acceptance Declaration** | | | | | | | | | | | | | | | |
| * I understand and accept the conditions of this Offer of Admission. I am seeking temporary entry into Australia for educational purposes only, as an Exchange student. I am aware that I may not undertake part-time studies or accept full-time employment. * I understand that admission to the University of Adelaide as an Exchange student does not entitle me to be awarded a qualification from the University of Adelaide. * I understand that if I am unable to arrive by the end of the first teaching week I may not be eligible to undertake study in that semester. * I understand that I, or my sponsor, will be responsible for the full costs of the program for which I am seeking admission, as well as the attendant travel and living costs. I have read and I accept the University of Adelaide’s refund policy: <http://www.adelaide.edu.au/student/finance/international/payment/refunds/>   *This agreement, and the availability of complaints and appeals processes, does not remove the right of the student to take action under Australia’s consumer protection laws.* | | | | | | | | | | | | | | | |
| Signature: | | | | | | | | | | | | Date: DD / MM / YYYY | | | |

This Payment Form need to be returned with the Acceptance Form to [inbound@adelaide.edu.au](mailto:inbound@adelaide.edu.au)

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| **Student Details *(please use BLOCK LETTERS)*** | | | | | | |
| Student ID: | a | | Home University: |  | | |
| Family / Surname: | |  | | Given Names: |  | |
| **Fees to be Paid - *All payments must be made in Australian Dollars*** | | | | | | |
| **Please choose your relevant Study Period:** | | | | | **Amount** | **Please tick:** |
| **Winter School 2015 1 course – 3 units (no tuition/health insurance)** | | | | | **AUD$0** | Yes  No |
| **Winter School 2015 2 courses – 6 units (no tuition/health insurance)** | | | | | **AUD$0** | Yes  No |
|  | | | | |  |  |
| **Winter School + Semester 2 2015** | | | | |  |  |
| University of Adelaide Tuition | | | | | AUD$0 |  |
| Overseas Student Health Cover (1 June 2015 – 31 January 2016) 8 months | | | | | AUD$412 |  |
| **Total to be paid to the University of Adelaide:** | | | | | **AUD$412** | Yes  No |
|  | | | | |  |  |
| **Semester 2 2015 only** | | | | |  |  |
| University of Adelaide Tuition | | | | | AUD$0 |  |
| Overseas Student Health Cover (1 July 2015 – 31 January 2016) 7 months | | | | | AUD367 |  |
| **Total to be paid to the University of Adelaide:** | | | | | **AUD$367** | Yes  No |
|  | | | | |  |  |
| **Full year – Semester 2 2015 and Semester 1 2016** | | | | |  |  |
| University of Adelaide Tuition | | | | | AUD$0 |  |
| Overseas Student Health Cover (1 July 2015 – 31 August 2016) 14 months | | | | | AUD$694 |  |
| **Total to be paid to the University of Adelaide:** | | | | | **AUD$694** | Yes  No |
| ***Allianz OSHC:*** [www.oshcallianzassistance.com.au](http://www.oshcallianzassistance.com.au) | | | | | | |
|  | | | | | | |
| **Students from Belgium, Norway and Sweden: Fees to be Paid** | | | | | | |
| **Study Period:** | | | | | **Amount** | **Please tick:** |
| University of Adelaide Tuition: | | | | | AUD$0 |  |
| Overseas Student Health Cover (or equivalent from Belgium, Norway or Sweden) | | | | | AUD$0 |  |
| **Total to be paid to the University of Adelaide:** | | | | | **AUD$0** | Yes  No |

|  |  |  |  |
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| **Payment – Tuition and Overseas Student Health Cover** | | | |
| **Payment by Credit Card** | | | |
| **Please notify your bank or financial institution and let them know that that you have approved the transfer of this payment, otherwise there will be delays in processing the payment.**  **Make sure you write clearly in BLOCK LETTERS as we cannot issue your Confirmation of Enrolment before we have your full payment confirmed.** | | | |
| I authorise the University of Adelaide to debit my credit card with the amount below: | | | |
| Student ID: | a | Student Full Name: | |
| Card Holder: (Title) | Dr  Mr  Ms  Miss  Other: | | |
| Family / Surname: |  | Given Names: |  |
| Please charge my : | Visa | Mastercard | AmEx |
| Card Number: |  | | |
| Expiry Date: | MM / YY | Amount AUD$: | $ |
|  | |  | |
| Signature of Card Holder Date | |  | |

Please note, for security reasons the Inbound Study Abroad & Exchange Office do not store any credit card details. Your payment details are sent through to Student Finance and then deleted from our system. No payment details are saved in our emails and/or systems.