

REPRESENTATIVE'S C



TRINITY COLLEGE OFFICE USE ONLY	

TRINITY COLLEGE FOUNDATION STUDIES APPLICATION FORM

There is no application fee. You must complete all sections of this application. Please write clearly in BLOCK LETTERS.

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Family Name					Given Names						
Male	emale	Date of Birth DD/MM/	/ /	/	Country of Bi	rth					
CITIZENSHIP (pt	lease answer	all questions)									
What citizenship	do you hold?				Do you have Au	ustralian pe	rmanent re	sidency status	5?	Yes	No
Have you applied fo	or permanent	residency in Australia	? Yes	No	Have you app	lied for Aus	stralian cit	izenship?		Yes	No
Do you have an Australian visa that is not a student visa? Yes No If yes, what type?											
STUDENT CORRESPONDENCE DETAILS (Correspondence will be sent here unless you apply through an official representative of Trinity College) Address											
City			Postcode				Country				
Telephone			Mobile				Fax				
Email											
PARENT GUARD	NIAN DETAII	ς									
Name	DIAN DETAIL	_5					Title				
Relationship to st	tudent										
Address (if differe	ent from abov	re)									
Telephone			Email								
	NUNDATION	CTUDIEC INTAKE									
February Main	JUNDATION	STUDIES INTAKE July Main		July Fast Trad	ck	October	Fast Track		August Er	ntry	
Other											
PREFERRED UNIVERSITY COURSE Bachelor of ACADEMIC HISTORY (Certified true copies of all latest available academic results or forecast results should accompany this form)											
Bachelor of			latest avail	able academic	results or forec	ast results:	s should ac	company thi	s form)		
Bachelor of ACADEMIC HIST	TORY (Certif		latest avail	able academic	results or forec			company thi			
Bachelor of ACADEMIC HIST	TORY (Certif	ed true copies of all	latest avail	able academic							
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ACADEMIC HIST Name of Qualification Name of School	FORY (Certif ation (eg. 0 le ol	ed true copies of all	latest avail	able academic							
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ACADEMIC HIST Name of Qualifica Name of School Address of School Further study (eg ENGLISH LANG IELTS SCORE	TORY (Certif ation (eg. 0 le bl j. A levels) UAGE (A cer	red true copies of all vels, SPM, HKCEE) retified true copy shot		any this form)							
Bachelor of ACADEMIC HIST Name of Qualificat Name of School Address of School Further study (eg) ENGLISH LANG IELTS SCORE TOEFL SCORE HOW DID YOU F	TORY (Certification (eg. 0 less) D. A levels) UAGE (A certification (eg. 0 less)	rtified true copy shot DATE DATE	uld accomp	any this form)	Year Awarded						

SEND APPLICATION FORM TO

Trinity College Foundation Studies Admissions Office Royal Parade | Parkville | Victoria 3052 | Australia Tel: +61 3 9348 7130 | Fax: +61 3 9348 7556

EMAIL: foundationstudies@trinity.unimelb.edu.au

WeB: www.trinity.unimelb.edu.au/foundation_studies

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