Sponsorship Registration Form

NO HANDWRITTEN APPLICATION WILL BE ACCEPTED

This form is for international students who will receive financial assistance to undertake studies at Swinburne University of Technology from a third party sponsor (not private individuals or relatives) other than Swinburne or an Australian government agency to undertake studies at Swinburne University of Technology. Swinburne International does not provide financial aid or refer students to potential sponsors. If you are unsure whether you qualify as a sponsored student please email **sponsoredstudents@swin.edu.au**



ALL SECTIONS OF THIS FORM MUST BE COMPLETED. PLEASE ATTACH A COPY OF YOUR LETTER OF FINANCIAL GUARANTEE ON OFFICIAL LETTERHEAD.

SECTION A: PERSONAL D	ETAILS OF SCH	OLARSHIP CAND	IDATE			
- -amily name: As indicated in passport)						
Given names: Leave spaces between names)						
Date of birth:	DD/M	MYYY	Student ID:	(0.00)		
Current employer: if applicable)				from the Letter of Offer)		
Current position held:						
SECTION B: SPONSORSHI	IP DETAILS					
Name of sponsor: Sponsorship start date:	D/MM	/ Y Y	Sponsorshi	p end date: DD/MM	/ Y Y	
Overseas Student Health	Cover (OSHC)					
Го enable us to arrange yo	our OSHC pleas	e respond to the	following:			
Do you already have OSHC	? No	Yes If yes, pleas	e provide a c	opy of your OSHC members	ship policy an	d complete the details below:
Name of OSHC provider:						
Membership number:						Expires: DD/MM/YY
Who will pay for your OSHO	C?	Myself	My spon	sor		
What type of OSHC cover c	do you need?	Single only		(2 Persons – Spouse or Part mplete section below)	tner only)	Family (more than 2 Persons – Spouse and/or Children only) (please complete section below)
If you require an upgrade	e to Couple or	Family cover ple	ase complete	the following:		
To upgrade to family cove	r, the differenc	e in premium cos	st must be pa	id. Please indicate who will _l	pay for the di	fference:
Myself			lease notify so your depen		du.au to upgr	ade your OSHC policy prior
*If your scholarship covers OS	SHC for your fami	ly, your sponsor/au	thorised repres	entatives must supply evidence	of this in writir	ng to Swinburne International.

	rtaking studies are required to pay the fees set by the University on or before the due date. A sponsored student is liable for any paid in full by their sponsor.
Do you require Sv	winburne to invoice your sponsor directly?
Yes, (complete	e section below) No, I will be paying Swinburne directly
Contact person:	
Address	
	Organisation name
	Number/street
	Suburb/city
	Country Postcode
Telephone:	Facsimile:
Email:	
Consent for Rel	ease of Information to Sponsor
	nts must provide consent for the release of their academic results to their sponsor and all information requested by their sponsor.
SECTION C: CAN	DIDATE'S DECLARATION AND FINANCIAL UNDERTAKING – to be completed by candidate
1.	give permission for Swinburne
University of Tech	(Student's name) Inology to provide my contact details and details of my academic performance including subject results, attendance and
enrolment inform	ation, and any other information requested by my sponsor to my sponsoring agency
	(Name of sponsor)
(and its represent	
Furthermore, I un	derstand that I am responsible to pay Swinburne the fees and health cover incurred and agree to do so if any fees are not paid in
	r, or if I am unable to provide a financial guarantee from my sponsor that is valid and covers the duration of my studies, by the date
required.	
Signed:	
Telephone:	
Address:	
and the signed C	is form together with a signed Letter of Financial Guarantee on official letterhead from your sponsor, Offer Acceptance Form, to enable us to proceed with the issuing of the required visa documentation (CoE) and the our registration as a sponsored student.
	sions can be sent via email: Hard-copy submissions can be made in person at:

International Student Counter

Hawthorn, Victoria - 3122

Australia

Hawthorn Library, LB Building, Level 2

international@swinburne.edu.au

Telephone: +61 3 9214 8444

Academic Fees