



**Honours Degree of Bachelor of Education
Application for Admission Form**

Office Use Only - Session Details		
ID Number	Course Code	Course Title
Academic Calendar	Process Category	Admission Calendar

COURSE DETAILS – PREFERENCE 1			
Course Code 2674	Course Title Honours Degree of Bachelor of Education	Campus Clayton	Commencing semester and year <input type="checkbox"/> Semester 1 <input type="checkbox"/> Semester 2 Year
Attendance Mode: <input type="checkbox"/> On Campus <input type="checkbox"/> Off Campus			
Attendance Type: <input type="checkbox"/> F/T <input type="checkbox"/> P/T			
Office Use Only - Basis for Admissions – (see reference table ADMF0270 for the list of values)			
PERSONAL DETAILS			
Title	Surname	Given Names	
Sex M <input type="checkbox"/> F <input type="checkbox"/>		Date of Birth / /	
Have you previously applied and/or studied at Monash University? Yes <input type="checkbox"/> No <input type="checkbox"/>			
If YES, please state Monash ID Number (if known) :			
Have you changed your name since you last applied/studied at Monash University? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please provide/attach relevant documentation.			
Are you a Monash staff member? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes please state you staff number:			
RESIDENCY STATUS <i>If none of the following, please complete the form Monash Direct Admissions (International students)</i>			
Are you: <input type="checkbox"/> An Australian citizen <input type="checkbox"/> A permanent resident of Australia <input type="checkbox"/> A New Zealand citizen			
HOME ADDRESS			
Number & Street		Suburb	
State	Country	Postcode	
Phone (AH)	Phone (BH)	Mobile Number	
Facsimile	Other Email Address		

POSTAL ADDRESS FOR CORRESPONDENCE				
Number & Street			Suburb	
State	Country		Postcode	
Phone (AH)	Phone (BH)		Mobile Number	
Facsimile	Other Email Address			
TERTIARY EDUCATION RECORD 1 (please provide a certified copy of academic transcripts/results)				
Degree/qualification		Field of study/Major/Specialisation		
Institution				
State	Country			
Year commenced	Year completed		Years Enrolled	
Did you complete? Yes <input type="checkbox"/> No <input type="checkbox"/>				
TERTIARY EDUCATION RECORD 2 (please provide a certified copy of academic transcripts/results)				
Degree/qualification		Field of study/Major/Specialisation		
Institution				
State	Country			
Year commenced	Year completed		Years Enrolled	
Did you complete? Yes <input type="checkbox"/> No <input type="checkbox"/>				
TERTIARY EDUCATION RECORD 3 (please provide a certified copy of academic transcripts/results)				
Degree/qualification		Field of study/Major/Specialisation		
Institution				
State	Country			
Year commenced	Year completed		Years Enrolled	
Did you complete? Yes <input type="checkbox"/> No <input type="checkbox"/>				
EMPLOYMENT HISTORY – Please provide details of any employment experience that may be RELEVANT TO THE COURSE APPLICATION . Supporting documentation i e. CV or references may be submitted. Please use additional pages if space below is insufficient.				
Occupation				
Employer	Position Held	FT or PT	Paid/Voluntary *please indicate approximate hours	Dates

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PROFESSIONAL EXPERIENCE AND MEMBERSHIP

Give details of teaching appointments and/or other professional experience/membership of professional societies/associations (where applicable).

Year(s)	Appointment Held

ADVANCED STANDING (Credit)

Are you seeking Advanced Standing (Credit) for prior study? Yes No

If Yes, please complete and attach an Advanced Standing Application form.

PROPOSED COURSE OF STUDY

Proposed field of study (Short Title):

.....

Please attach a brief outline of the proposed field of study which you intend to pursue. Your summary should be approximately 200 words.

Please indicate below academic staff member(s), if any, with whom you have discussed your research proposal and/or possible supervision arrangements:

.....

ENGLISH LANGUAGE PROFICIENCY

State in which way you fulfill the Faculty's English Language proficiency requirements by ticking the appropriate statement below. Documentary evidence must be provided in all cases. For further information please consult the guidelines available from the Faculty of Education.

- I have passed my secondary studies, which were conducted, entirely in English medium
- I have passed my tertiary studies (of three years or longer) which were conducted entirely in English medium
- I have achieved a score of no less than 577 on the TOEFL (computer based score of 233) and 4.5 on the TWE or 91 Internet based TOEFL
- I have achieved a score of no less than 6.5 (no individual score below 6.0) on the IELTS
- I have rated as 3+ on the ASLPRs for all skills
- I have satisfactorily completed the Direct Entry Program at MUELC

DECLARATION	
I declare that the information supplied on this form and the information given in support of my application are correct and complete. I acknowledge that the provision of incorrect information or the withholding of relevant information relating to my application and/or academic transcript may result in the withdrawal of an offer of a place in the course. I authorise the University to obtain official student records from any educational institution or past/current employer(s) necessary to make an informed decision about the application or matters that concern my enrolment at Monash. I agree to abide by the statutes and regulations of Monash University.	
Applicant's Signature _____ Date: _____	
PLEASE RETURN APPLICATION TO:	
Research Degrees Office Faculty of Education Clayton Campus Building 6 MONASH UNIVERSITY VIC 3800 Phone: (03) 9905 2819 Email: info@education.monash.edu.au	
CHECKLIST:	
<input type="checkbox"/> Completed and signed application	<input type="checkbox"/> Application for Advanced Standing if relevant
<input type="checkbox"/> Certified copies of official transcripts	<input type="checkbox"/> any other additional information required by individual courses
<input type="checkbox"/> Evidence of English Proficiency	<input type="checkbox"/> 200 word Research Proposal

RESEARCH AUTHORISATION – To be complete by Supervisor
I (Print Name)..... confirm that I agree to act as Supervisor for this candidate:
Signature:.....Date:
Comments by Supervisor on viability of research proposal, coursework required etc:
Is an Associate Supervisor required? Yes <input type="checkbox"/> No <input type="checkbox"/>
If an Associate Supervisor is warranted for this project the following person has been approached and has agreed to act as Associate Supervisor
FACULTY AUTHORISATION: To be Completed by Dean's Nominee
I confirm that the Research Candidature Committee of the Faculty of Education has approved this application for admission into the Honours Degree of Bachelor of Education;
Signature of Dean's Nominee: _____ Date: _____
Print Name: _____

Office Use Only			
Offer of Admission	<input type="checkbox"/>	Rejection – No Offer	<input type="checkbox"/>
Offer of Admission with Conditions	<input type="checkbox"/>	Reason for rejection	
Offer Conditions – please state	<input type="checkbox"/>		
Offer Authorised by:	Rejection Authorised by:		
Date:	Date:		

The information on this form is collected for the primary purpose of assessing your application. Other purposes of collection include the creation of a record on the student database, attending to administrative matters, corresponding with you and statistical analyses. If you choose not to complete all the questions on this form, it may not be possible for the Faculty of Education to assess your application. Personal information may also be disclosed to the education institutions or your employer(s) to make an informed decision about the application or matters that concern the student's enrolment at Monash. You have a right to access personal information that Monash University holds about you, subject to any exceptions in relevant legislation. If you wish to seek access to your personal information or inquire about the handling of your personal information, please contact the University Privacy Officer on 9905 6011. September 2005