



Application for Cross-Institutional Study

(University of South Australia students applying to study at another institution)

Note this is **NOT** an enrolment form. If your application is approved by UniSA you will need to complete the enrolment procedure at the OTHER Institution in the normal way.

Section 1

Name: _____ Date of birth: ___/___/___

Contact Address: _____

Contact Phone Numbers: Work: _____ Home: _____ Mobile: _____

Section 2 – UniSA

Program in which you are currently enrolled: _____

Student Id Number: _____

Are you an international fee-paying or sponsored student? Yes: No:

Section 3 – Other Institution

In which OTHER Institutional do you wish to enrol? _____

Have you ever been enrolled in this institution before? Yes: _____ No: _____

If 'yes' Student Id number at other institution: _____

Section 4a

Subjects / Courses – OTHER institution

Section 4b

Equivalent Subject/Course – Office Use Only

No	Code	Title	Mode	Units	Sem		Code	Title	Units
1									
2									
3									
4									

Section 5a

Authority from OTHER Institution

This student is authorised to study the subjects/courses listed above

Signature: _____

Name: _____

Position: _____

Section 5b

Authority from UniSA

This student is authorised to enrol in the subjects/courses listed in 4a

Program Director: _____

Signature: _____

Date: _____

I consent to the exchange of details of my student record between the above Institutions.

Signature of Applicant: _____ Date: ___/___/___

Note: It is the Student's responsibility to request a results notice or Academic Transcript from the OTHER institution and then apply for credit at UniSA.