



Please ensure you read the entry requirements for the program you wish to enrol into prior to submitting your application. Insufficient information provided will result in a delay of processing your application. To be eligible to enrol in the Chifley 'Flexible' MBA you must hold Australian Citizenship or an Australian Permanent Residency visa.

First Name

Last Name

APPLICATION PROCESS

Please tick the appropriate box

Please state the month and year you wish to commence: Month Year Y Y Y Y

Have you previously enrolled in the Chifley program? No Yes If yes, student #

Do you hold an undergraduate Bachelor degree? No Yes *If yes, a credit application must accompany this form

Please enter the details of the unit(s) you wish to enrol into.

Unit Number	Unit Name
Unit Number	Unit Name
Unit Number	Unit Name
Unit Number	Unit Name

Flexible Students Only:

Do you have any Special Dietary Requirements? No Yes If Yes, please detail

Location New South Wales Victoria Queensland **Month/Intake**

Distance (Online) Students Only: Trimester/Study Period

ENTRY REQUIREMENTS

A minimum of an undergraduate degree from a recognised Higher education Provider is required, in addition applicants must also have at least three years of relevant work experience. If your undergraduate Bachelor degree was not taught in English, please attach evidence to indicate that you have: a TOEFL score of 577 or computer-based score 233 or higher, or an IELTS score of 6.5.

If you do not hold an undergraduate degree you are eligible to apply for entry to the Graduate Certificate of Business Administration if you have seven years of professional, administrative or managerial work experience. Applications will be assessed on a case by case basis. Successful completion of the Graduate Certificate will allow automatic entry to the Graduate Diploma or Master of Business Administration with 100% credit. You must attach certified copies of your qualifications & CV or resume outlining required work experience for your application to be processed. All documents must be in English.

HIGHEST QUALIFICATION ACHIEVED

Qualification Name (e.g. BEng) Year Conferred Y Y Y Y

Field of Study (e.g. Engineering) Discipline (e.g. Electrical)

Name of Institution

Country Qualification Attained



PERSONAL DETAILS

Title Mr / Mrs / Miss / Ms / Dr / Other

First Name

Last Name

Date of birth D D M M Y Y Y Y

Gender Male Female

Position

Organisation

Industry

Phone (business)

Mobile

Email

PREFERRED CORRESPONDENCE ADDRESS

Home Work

Address

Suburb

State

Postcode

PAYMENT

Please select a payment option below. To ensure your place, payment must accompany this form. If payment is not enclosed, Purchase Order details must be provided. Applications without payment details will not be processed. Please refer to the website for fees.

Credit Card
(please contact us for
payment form)

FEE-HELP
***Fee-Help
Form must be
submitted**

EFT
(please contact
us for banking
details)

Employer Invoice
(please contact us for
banking details)

EMPLOYER INVOICE

Company Name

Address

Suburb

Country (If not Australia)



DEEWR STATISTICS FORM (Department of Education Employment and Workplace Relations)

It is a legal requirement for anyone wishing to undertake study with an Australian education institution to provide these details. The data collected is then used by DEEWR for statistical & taxation purposes. These details are NOT provided to any third party.

Title Mr / Mrs / Miss / Ms / Dr / Other Gender Male Female

Family Name

Given Names

Date of birth D D M M Y Y Y Y

Signature of student

1. DO YOU HAVE A DISABILITY, IMPAIRMENT OR LONG TERM MEDICAL CONDITION?

No Yes If yes, the disability or medical condition is describe as:

Hearing Learning Medical Mobility Vision
Other

2. EDUCATION STATISTICS

Did you complete Year 12? No Yes If yes, in what year did you completed Year 12? D D D D

3. ARE YOU OF ABORIGINAL OR TORRES STRAIT ISLANDER DESCENT?

Are you of Aboriginal descent? No Yes

Are you of Torres Strait Islander descent? No Yes

4. PLEASE SELECT THE CITIZENSHIP/RESIDENCY THAT APPLIES TO YOU

Australian Citizen New Zealand Citizen Australian Permanent Humanitarian Visa *

Australian Permanent Resident * Date you obtained Permanent Residency D D M M Y Y Y Y

Australian Temporary Entry Permit

* Please provide proof e.g. certified copy of label in passport

5. RESIDENCE

Permanent home address postcode

Current residence postcode

Year 12 residence suburb postcode

If **permanent** residence is overseas, state country

If **current** residence is overseas, state country

If born overseas, indicate year of arrival in Australia

Country of birth

If Year 12 residence is overseas, please state country

Primary language spoken



CHECK LIST

Please ensure you have included the following prior to submitting your application for enrolment. Incomplete applications will not be processed.

Certified copy of your degree and relevant documentation

Payment (Page 2 of this form)

Completed DEEWR Statistics form (Page 3 of this form)

Credit Application Form (If relevant)

PRIVACY STATEMENT

Chifley respects your privacy and strictly controls use of personal information. The information you provide on your enrolment will be used in administering the Chifley Business School program, which involves the use of external service providers. Where it is necessary to involve a third party service provider, Chifley will ensure that a confidentiality agreement is in place to protect your personal details, and will only supply details which are necessary to provide the agreed service. Your enrolment will be an indication of your consent to utilise any necessary information to administer the program by Chifley and these third party service providers. You may obtain details of your personal information held by Chifley or our detailed privacy statement by contacting our office on 1300 244 353.

DECLARATION

I declare that to the best of my knowledge the information I have supplied in this application for admission to the Chifley program is correct and complete. I have read the relevant admission requirements, privacy statement and course structure information. I acknowledge that it is my responsibility to ensure that I seek advice on re-enrolment and variances to my re-enrolment that I may require. I agree to pay any fees and charges up front each study period for any units I wish to enrol in. I acknowledge that while I am enrolled in a Chifley program I am subject to the legislation, policies and procedures of that program.

Signature

Print Name

Date

Please submit your application to:

Student & Academic Services,
Chifley Business School,
Suite 1 Level 12, 636 St Kilda Road,
Melbourne 3004

OFFICE USE ONLY

Date received						Forms checked by	
Forms	Quals	Additional Attachments					
DEEWR	Attached	Credit				Outcome	
	With credit appl	Corp					
						OK to process	