

Application for Admission to Undergraduate or Pre-degree Study

For International Students



A Personal Information

Title Mr Miss Ms Mrs Other

Legal family name

Given name/s

Date of birth / / Female Male

Country of birth (as stated on passport)

Country of citizenship

Postal address (for correspondence relating to this application)

Country

Telephone
Country Code Area Code Phone Number

Email

Preferred given name

Permanent address in home country (If different from Postal Address)

Country

Telephone
Country Code Area Code Phone Number

Mobile

Facsimile
Country Code Area Code Phone Number

Please print clearly as we will send an email with your username and password for LUCAS, our enrolment system.

B Study Information

Have you studied at Lincoln University before? No Yes, Student ID (if known)

Which degree/qualification is this application for?

Degree/qualification

Major

When do you intend to begin your studies? Year

Semester One (February – June)
 Semester Two (July – November)
 Summer semester (November – February)
 Summer school (November – December)
 Summer school (January – February) } A limited number of undergraduate degree courses are offered during these Summer Schools.

C Academic Background

Please provide details and official documentation of academic results for completed previous study.

High School / Secondary School / Foundation Study

Name of School	Country	Qualification Achieved	Year Started	Year Finished

Tertiary Study (if applicable)

Name of School	Country	Qualification Achieved	Year Started	Year Finished

Are you currently waiting on results of study? No Yes Please provide details below.

Date when results are due



Are you seeking to transfer credit from previous study? No Yes – Official or certified true copies of academic transcripts and course outlines will be required for an assessment.

D English Proficiency

All students are required to meet the University's English language requirements.

Is English your first language? Yes No – Please complete details of English language tests you have taken.

Test Type eg IELTS, TOEFL	Score Details	Year Finished

Do you wish to study an English language course at Lincoln University before beginning your academic programme?

No Yes – Please send me an offer letter confirming a place in Lincoln's English Language School. Minimum 12-week courses must be taken prior to the start of the academic programme. For more information visit www.lincoln.ac.nz/english

If yes, in which month/year would you like to start
Month year

E Agent

This application is submitted on behalf of the applicant, by an approved agent of Lincoln University.



Lincoln University Agent ID#

Agent Email

Agent Signature



Agent Stamp

F Checklist

All applicants must supply certified true copies of documents listed here. If not in the English language they must be accompanied by a translation from a reputable translation service.

- All academic transcripts relevant to your application – certified copies
- English language test (original test scores should be sent by the testing centre to Lincoln University. Lincoln University's institution code for TOEFL tests is 9479)
- Birth certificate or passport – a certified copy
- Course outlines (if applying for admission with credit to an undergraduate programme)

G Declaration

- I declare that to the best of my knowledge the information supplied above is correct and complete. I acknowledge that the provision of incomplete, misleading or fraudulent information may lead to the review of any decision made in respect of this application.
- I declare that the application may be used for purposes relating to my enrolment as a student by members of the academic and administrative staff of Lincoln University or of any other tertiary institution in New Zealand or Australia to which I may subsequently transfer.
- I declare that the application may also be used for purposes external to the University when it is in statistical form or when it is not to my disadvantage, and also where disclosure is required to comply with the provisions of the Privacy Act 1993 (New Zealand only).
- I declare that I have the right to see and correct if necessary the information I have provided.
- I declare that if this application is submitted through an agent of the University the outcome of the application will be communicated to the agent unless I state otherwise.
- I declare that my enrolment cannot proceed without my consent to the foregoing conditions.

- I have read and understood the terms and conditions of the Lincoln University International Student Refund Policy.

For the purposes of your electronic enrolment at Lincoln University, you will be supplied with a unique Username, Password and Student ID number, which will then become known as your 'Electronic Signature'.

By signing this document, I am confirming the following:

- That the evidence of identity I supply (e.g. birth certificate, passport) belongs to me
- That I authorise the use of my electronic signature for admission, enrolment, registration and graduation purposes
- That I accept all responsibility for all uses of my electronic signature
- That I agree not to give my username and password to other people.

Applicant's Signature

Date (day/month/year)

Please send to:

Student Administration, Freepost 36, PO Box 85084, Lincoln University, Lincoln 7647, Christchurch, New Zealand
Telephone: +64 3 423 0044