Application for Admission to Undergraduate or Pre-degree Study



For International Students

Date when results are due

A Personal Information				
Title □ Mr □ Miss □ Ms □	Mrs 🗆 Other			
Legal family name	Preferred given name	Preferred given name		
Given name/s				
Date of birth / / / Day month year	☐ Female ☐ I	Male		
Country of birth (as stated on passport)				
Country of citizenship		Permanent address in home country (If different from Postal Address)		
Postal address (for correspondence relating to	this application)			
		Country		
Country		Telephone	Area Code Phone Numbe	ir
Telephone Country Code Area Code Pho	na Numbar	Mobile	niea code - i none Nambe	
Email Country code Area code Prio	ne Number	Facsimile		
Please print clearly as we will send ar	1 11	,	Area Code Phone Numbe	er
Major When do you intend to begin your stu Semester One (February – June) Semester Two (July – November) Summer semester (November – Fe Summer school (November – Dec	ebruary) ember) } A limited number o	f undergraduate degree courses hese Summer Schools.		
C Academic Background Please provide details and official do High School / Secondary School / Fo		sults for completed previous 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 o	f study? No Y	es Please provide details below.		

Are you seeking to transfer credit from previous study? \(\sum \) No	Yes – Official or certified true copies of academic transcripts a course outlines will be required for an assessment.	and
D English Proficiency All students are required to meet the University's English language	requirements.	
Is English your first language? Yes No – Please comple	ete 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 Univers	ity before beginning your academic programme?	
No Yes – Please send me an offer letter confirming a plac must be taken prior to the start of the academic	e in Lincoln's English Language School. Minimum 12 programme. For more information visit www.lincoln.a	
If yes, in which month/year would you like to start Month year	ar	
E Agent This application is submitted on behalf of the applicant, by an appl	roved agent of Lincoln University.	
Lincoln University Agent ID#		
Agent Email		
Agent Signature		
Agent Stamp		
All applicants must supply certified true copies of documents listed a translation from a reputable translation service. All academic transcripts relevant to your application – certified English language test (original test scores should be sent by the testing cent Birth certificate or passport – a certified copy Course outlines (if applying for admission with credit to an under	copies re to Lincoln University. Lincoln University's institution code for TOEFL	
 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 	 I have read and understood the terms and cond Lincoln University International Student Refund For the purposes of your electronic enrolment at Li University, you will be supplied with a unique User Password and Student ID number, which will then known as your 'Electronic Signature'. By signing this document, I am confirming the follo That the evidence of identity I supply (e.g. birth passport) belongs to me That I authorise the use of my electronic signature admission, enrolment, registration and graduat That I accept all responsibility for all uses of my signature That I agree not to give my username and passw people. 	Policy. ncoln rname, become owing: certificate, are for ion purposes electronic
communicated to the agent unless I state otherwise. • I declare that my enrolment cannot proceed without my	Applicant's Signature	

consent to the foregoing conditions.

Date

(day/month/year)