

A Personal Statement is used for some courses to obtain additional information for assistance in selection.
Courses requiring the completion of this Personal Statement are specified in course admission requirements at: latrobe.edu.au/courses

PLEASE NOTE: Some courses may require additional background information in addition to this Statement.
Please ensure that you have checked all required documents for this course on our website: latrobe.edu.au/courses

Complete all sections and ensure this form is submitted with your Coursework application.

Instructions on how to submit your application and closing dates can be found at: latrobe.edu.au/study/apply/international

If you have already submitted your application, please email this Statement with your application ID to: intapplication@latrobe.edu.au

Section A – Personal Details

| | | | | | | | | |
|------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|--|----------------------|----------------------|
| Family Name | | | | | | Given Name(s) | | |
| Mrs | Ms | Miss | Mr | Dr | Other | Male | Female | Other |
| Email | | | | | | Contact Number | | |
| Country of Application | | | | | | Agent (if applicable) OzTREKK educational services | | |
| Date of birth | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | Day | Month | Year | | | | | |

Section B – Course Details

| | | | | | | | | | |
|---|-------|-------|-------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| La Trobe Course Title | | | | Course Code | | | | | |
| Intake | Sem 1 | Sem 2 | Other | | | | | | |
| Have you previously enrolled at La Trobe University or have you already submitted an application and been provided with a La Trobe ID number? | | | | | | | | | |
| Yes No | | | | | | | | | |
| If yes, please provide your student number | | | | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Section C – General Statement

Explain why you are applying for the course, and what your current field of interest is and/or future employment goals you have.
Text is limited to 2000 characters, including spaces.

CONTACT DETAILS

La Trobe University, Victoria 3086, Australia | T +61 3 9479 1993 | E intapplication@latrobe.edu.au

CRICOS Provider 00115M • Privacy Policy: Details regarding collection, use, disclosure and access of personal information from this form are available from latrobe.edu.au/privacy or from your local student administration office, or by telephone at +61 3 9479 2005.

Section D – Declaration and Agreement

- I declare to the best of my knowledge that the information supplied on this Personal Statement and all supporting documentation is correct and complete, and that any supplementary application documents are my own work. I acknowledge that La Trobe University reserves the right at any stage to vary or reverse any decision regarding admission or enrolment which has been made on the basis of incorrect, fraudulent or incomplete information. I also acknowledge that failure to disclose my full academic record may result in the University revoking an offer or terminating my studies at any stage. I authorise the University to seek verification of my academic and professional qualifications, and work experience by contacting referees listed in this Statement.
- I have completed all sections of the Statement.
- I accept that this Statement and supporting documentation become the property of La Trobe University and are not returnable.
- I understand this agreement does not remove my right to take further action under Australia's consumer protection laws.
- I have read and I understand the declaration above.

Applicant's signature

| | | | | | | | | | |
|----------------------|----------------------|---|----------------------|----------------------|---|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | / | <input type="text"/> | <input type="text"/> | / | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Day | | | Month | | | Year | | | |

CONTACT DETAILS

La Trobe University, Victoria 3086, Australia | T +61 3 9479 1993 | E intapplication@latrobe.edu.au

CRICOS Provider 00115M • Privacy Policy: Details regarding collection, use, disclosure and access of personal information from this form are available from latrobe.edu.au/privacy or from your local student administration office, or by telephone at +61 3 9479 2005.