

SEMESTER 1, 2025 HEADSTART

APPLICATION FORM



- This form is for Year 10 (Semester 2 only for Year 10), Year 11 and 12 high school students (**applicants**) wishing to undertake individual courses under the Headstart Program at UniSC
- Refer to the applicant checklist on the last page of this form for a list of the supporting documentation you will need to submit with your application
- Tuition fees apply for those on visas. Visit: www.usc.edu.au/payfees
- If you experience any issues accessing our forms, please contact [Student Central](#) for further assistance.

1.0 PERSONAL DETAILS

Given name:		Family name:		
Previous family name: <i>If applicable</i>		Preferred name:		
Date of birth:	Male	Female	Other	Country of birth:
In what country were you born?	Australia	Other Country		Year of arrival to Australia
Preferred contact phone number:		Alternative phone number:		
Email:				

MAILING ADDRESS

Number and Street (or PO Box):		
Suburb or town:	State:	Postcode:

PERMANENT RESIDENTIAL ADDRESS

Same as above

Number and Street:		
Suburb or town:	State:	Postcode:

2.0 PERSONAL STATISTICAL DETAILS (THIS INFORMATION IS REQUIRED BY THE COMMONWEALTH GOVERNMENT)

1. Are you of Aboriginal or Torres Strait Islander origin?

For persons of both Aboriginal or Torres Strait Islander origin, tick both 'YES' boxes

Aboriginal	Yes	No
Torres Strait Islander	Yes	No

2. What is your citizenship or residency status?

- a) I am an Australian citizen
- b) I am a New Zealand citizen
- c) I am a permanent resident (excluding New Zealand Citizens)
- d) I am a dependent of a diplomat (except New Zealand) and will reside in Australia during semester
- e) I am a Pacific engagement visa holder
- f) I have a temporary entry permit (eg temporary resident visa)

Please specify: _____

Attach copy of visa documents

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3.0 ENGLISH LANGUAGE REQUIREMENTS

1. Do you speak a language other than English at your permanent home residence? Yes No
If 'YES', name of non-English language that is spoken most often: _____
2. Is English your first language? Yes No If 'NO' please specify first language: _____

4.0 COURSE ENROLMENT

Which semester do you wish to commence study? Semester 1 Semester 2
Which location are you wanting to study at? Sunshine Coast Gympie Fraser Coast Caboolture Moreton Bay Online

Refer to [Available courses](#) on the UniSC website for the most up-to-date information on course availability at each location and requirements.

In the table below, enter the course code and course title for the course you wish to enrol in.

Course Code (eg PSY100)	Course Title (eg Introduction to Psychology A)

5.0 ACADEMIC HISTORY

School name: _____

Learning Unique Identifier (LUI) (Contact your school office for your LUI): _____

Your year level (during your intended semester of study): _____ The year you will complete Year 12: _____

School subjects being studied during your intended semester of study (eg Chemistry, Mathematical Methods):

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6.0 ADMISSION STATISTICAL DETAILS

List any other educational qualifications you have completed (eg Certificate III in information Technology):

7.0 SCHOOL'S STATEMENT OF SUPPORT (TO BE COMPLETED BY THE SCHOOL HEADSTART COORDINATOR)

I confirm that:

This student is achieving at B grade average or better*

This student meets the prerequisite/s for the course (if relevant), refer to [available courses](#).

I believe this student is capable of successfully undertaking university study.

I agree to meet with this student regularly to discuss their progress and inform the University of any relevant issues.

Name: _____ Signature: _____ Date: _____

Position: _____ Email: _____ Tel: _____

Note: Special circumstances may be considered on a case by case basis. Please attach a written statement outlining the special circumstances and explain why they will succeed at Headstart.

PARENT/GUARDIAN PERMISSION DECLARATION

NB: A parent or guardian must sign this permission form.

Print full name of applicant under the age of 18: _____

PERMISSION FOR INTERNET ACCESS

Federal Government legislation and internet service provider codes restrict internet services for people under 18 years of age.

The [Broadcasting Services Amendment \(Online Services\) Act 1999](#), has created a co-regulatory scheme for dealing with internet content including ensuring that internet access is not provided to people under the age of 18 without the consent of a parent or responsible adult.

For information on how to supervise use of the internet and how to protect people from offensive material on the internet, please consult the [Australian Communications and Media Authority](#) website. UniSC does not normally supervise and/or censor internet access.

Internet accounts are offered to staff and students of UniSC for work associated with learning, teaching, research and administration. Staff and students are bound by the [Acceptable Use of ICT Resources Governing Policy](#) which is available on the UniSC website.

I am the parent/guardian of the above-named applicant. I have read the [Acceptable Use of ICT Resources Governing Policy](#) and agree to the conditions of use. I understand that all internet services are available through the network account and that no censorship of the applicant's internet access will be undertaken by UniSC.

PLEASE INDICATE YOUR PERMISSION *(please select appropriate box):*

I give permission for the above-named applicant to receive full access to the internet through UniSC.

I **do not** give permission for the above-named applicant to receive full access to the internet via the University of the Sunshine Coast.*

* Note: While parents/guardians are not required to provide permission for the applicant to have internet access, if permission is withheld then the applicant may be unable to complete their course/program of study.

PARTICIPATION IN GROUP WORK

I understand that the applicant may be required to participate in group work activities as part of their course and that these group work activities may contribute to assessment tasks. I understand that depending on the format of the applicant's course, some group work activities may require the applicant to work with other UniSC students outside of class time either in person or online, for example by communicating by email or Zoom. I understand that if the applicant experiences any difficulty in working with other UniSC students, they can contact their Course Coordinator, Student Wellbeing or Safe UniSC for advice.

* Note: If you do not wish the applicant to participate in group work, please select a Headstart course where group work does not form part of an assessment activity, refer to the Course Outlines for details.

PARTICIPATION IN RECORDED ZOOM (ONLINE) INVIGILATED EXAMS

To better facilitate remote technology-enabled learning and teaching for the benefit of all students, examinations may occur through recorded Zoom invigilation by UniSC for use by UniSC to assess student adherence to the rules and protocols of examinations.

The personal information UniSC may collect as part of this recording includes:

- The applicant's name and image, as it appears on their personal Zoom screen visible to UniSC staff;
- The applicant's written questions and statements, as they appear in any chat content that they contribute to.

If the applicant participates in examination through recorded Zoom invigilation, they are consenting to the collection, use and disclosure of their personal information for the purpose of UniSC assessing their adherence to the rules and protocols of examinations (unless UniSC is otherwise required by law). While UniSC encourages all students to participate in remote examinations in this manner, if the applicant does not want their personal information to be collected, used and disclosed for this purpose, the applicant can nominate to sit their online examination on campus.*

Zoom invigilated examinations will be recorded and securely stored in line with the University's policies and procedures. Recordings will be securely disposed of within six months or earlier if no longer required for the purpose for which it was collected

If you have any concerns about the collection, use and disclosure of the applicant's personal information described above please do not hesitate to raise those concerns now or, if you prefer, by contacting UniSC's Privacy Officer on rti-privacy@usc.edu.au.

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PLEASE INDICATE YOUR CONSENT *(please select appropriate box):*

I consent for the above-named applicant to participate in examinations through recorded Zoom invigilation on the basis set out above.

I do not consent for the above-named applicant to participate in attend examinations through recorded Zoom invigilation on the basis set out above.*

ATTENDING CAMPUS FOR CLASSES AND/OR TO ACCESS RESOURCES AND SUPPORT SERVICES

I understand that unless the applicant is enrolled in a course which is delivered entirely online, they may be required to attend classes on a UniSC campus. I understand that although some UniSC campuses have 24/7 facilities available for students, the applicant will not be required to attend campus outside of scheduled class times unless they are participating in a course which involves a field trip.

* Note: support services and most library resources are available online. If you do not wish the applicant to attend campus, please select an online Headstart course.

USE OF UniSC STUDENT EMAIL ADDRESS

Upon enrolment at UniSC, the applicant will be issued with a UniSC student email address. I understand that UniSC recommends Headstart students should use their student email address for all their communications with people at UniSC. I understand that the applicant should exercise caution in providing their personal contact details to other students.

WITHDRAWING FROM HEADSTART

I understand that the applicant can withdraw from the Headstart program at any time by emailing studentcentral@usc.edu.au Refer to the [UniSC Academic Calendar](#) for the census date.

Name of parent/guardian: _____ Signature: _____

APPLICANT DECLARATION

I agree to obey the policies, guidelines and rules of UniSC as far as they may apply to me/the applicant. I declare that the information supplied herein is correct and complete. I authorise UniSC to obtain official records from any other educational institution previously attended by me/the applicant, and acknowledge that UniSC reserves the right to vary or reverse any decision regarding admission or enrolment made on the basis of incorrect or incomplete information. If any information is discovered to be untrue or misleading in any respect, I understand that the University may collect, store and disclose this information to Universities Australia and Universities Australia member institutions and any other relevant authority.

UniSC uses email and/or mail to communicate administrative matters to students. I/the applicant agree to check my UniSC email account on a regular basis and to maintain current mailing address details on USC Central.

I agree to the below named parent/guardian being provided with information about my student record and grant them permission to make requests for amendments to my application or enrolment status.

I agree to staff from my school being provided with information about my student record and grant them permission to make requests for amendments to my application or enrolment status.

UniSC is collecting the information on this form to carry out its functions under the University of the Sunshine Coast Act 1998, and in particular for:

- Assessing whether your application for enrolment should be approved;
- Meeting reporting obligations required by law or under Federal and State government funding arrangements;
- Administering and planning appropriate education, training and support services to students;
- Assisting staff to maintain the good order and management of the university, and to fulfil their duty of care to students and staff;
- Communicating to students and parents, both in relation to the delivery of the Headstart program and to advise of other university programs and events which may be of interest.

PARTICIPATION IN GROUP WORK

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PRIVACY STATEMENT

UniSC may disclose personal information collected in this form to third parties (including the Commonwealth Department of Education, Employment and Workplace Relations and the Australian Taxation Office). Your personal information will be stored securely. If you wish to access or correct any of the personal information on this form or discuss how it has been dealt with, please contact information@usc.edu.au in the first instance. If you have a concern or complaint about the way your personal information has been collected, used, stored or disclosed, please contact privacy@usc.edu.au. For more information visit the Privacy page of the UniSC website at: www.usc.edu.au/privacy.

Applicant signature: _____

Date: _____

Parent/guardian signature: _____

Date: _____

Parent/guardian email: _____

Reminder: please ensure you complete the 'Application Checklist' below before submitting your application.

APPLICANT CHECKLIST

YES I have:

- Completed the entire application form
- Attached copies of your most recent report cards that include teacher comments for each subject
- Attached a copy of your visa documents (*if applicable*)
- Obtained the permission (*signature*) of a parent/guardian
- Obtained approval (*signature*) from my school's Headstart Coordinator

LODGEMENT

Email: information@usc.edu.au

ENQUIRIES

Phone: +61 7 5430 2890

Email: information@usc.edu.au

Student Central: At any UniSC campus