

Cross-Institutional Study Home Institute Approval Form

(home institute to complete)

| Family name | | First name | | Home Instit | Home Institution Student ID | |
|---|------------------------------------|-------------------------------------|--------------------------|---------------------------|-----------------------------------|---|
| | | | | | | |
| Date of birth | | Email address (please | write clearly) | | | |
| Phone (home) | | Phone (mobile) | | SCU Student ID (if known) | | _ |
| Institution remarks or The Uni | | | F.11 | De ala de media | Desire of Administration | |
| Institution name (e.g. The Uni | versity of Melbou | irne) | Full course name (| e.g. Bachelor of | Business Administration) | |
| Proposed units/subjects of st | udy | | | | | |
| SCU unit code (e.g. LAWS2057) | | SCU unit name (e.g. Welfare Law) | | Study year (e.g. 2022) | Location/campus (e.g. Lismore) | |
| | | | | | | - |
| | | | | | | |
| | | | | | | |
| Will all the unit(s) listed above | | | Yes: No: |) | | |
| How are the student's fees pa Commonwealth Supported | Commonwealtl | h | Commonwealth Support | | Commonwealth Supported | |
| Domestic full fee paying | Supported (Gra International fu | | (Prof Pathway Social Wor | ·k) | (Prof Pathway Psychology) | |
| Is this request through the RU | N Program? | Yes: No |): (| | | |
| Additional comments (if any) | | | | | | _ |
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| | | | | | | |
| University Officer's signature | | | Date signed | | | |
| | | | DD/MM/YYYY | | | |
| | | | | | | |
| Position at institution | | | | | | |
| | | | | | | |
| Contact phone number | | | | | | |
| | | | | | | |
| Email address | | | | | | |
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