

Student Number

Title  Mr  Mrs  Ms  Miss  Dr  
 Other

Surname

Given Names

Preferred Name

Gender  Male  Female  Indeterminate/  
Intersex/Unspecified

Date of Birth (DDMMYYYY)

Are you an International Student?  Yes  No

**Postal Address** (must be completed by all students)

Number & Street or PO Box

Suburb / Town

State  Postcode

Country (if outside Australia)

Home Phone

Work Phone

Mobile Phone

Email  Have you activated your student account?  
All correspondence sent to students by CDU will be sent to the student's official CDU email address.

Course Code  Last year of study

Course Name

Specialisation

**This section is for Teaching Students only**

If you intend to teach outside of your home state or territory and require us to send your Academic Record to an interstate Registration Board, please advise which state:

(CDU will automatically send your Academic Record to Teachers Registration Board in your home state or territory unless indicated otherwise).

**This Section is for Combined Degree Students only (Please tick the appropriate box)**

I believe I am eligible and wish to graduate at the earliest opportunity, from;

Tick only one box	Course you wish to graduate from	Continuation information
<input type="checkbox"/> First Degree		I wish to continue studying for the second degree
<input type="checkbox"/> First Degree		I do not wish to continue studying for the second degree
<input type="checkbox"/> Second Degree		I have previously completed my first degree
<input type="checkbox"/> Both Degrees		I have satisfied all requirements for the combined degree

**This Section is for Bachelor of Laws Students only** (please tick appropriate box)

Upon completion, I require the CDU to issue the following documentation to my State/Territory Admission Board:

Priestly 11 Letter  Dean's Certificate/Letter  Academic Conduct

Address of Admission Board:

The above information is provided on the understanding that I have completed all course requirements as specified in the Courses and Programs section of the University Website and believe that I am eligible to graduate.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/