



FLINDERS HOUSING

Flinders University
GPO Box 2100, Adelaide,
South Australia 5001, Australia

APPLICATION FOR ADMISSION TO UNIVERSITY HOUSING IN YEAR 2012

Please indicate which residence you are applying for. If you wish to be considered for more than one residence please indicate your preferences by marking the appropriate boxes from 1 to 3.

Deirdre Jordan Village Townhouse (not available to 1st yr students)
Deirdre Jordan Village Unit

① If you are applying for a Village Residence do you have a preferred flatmate(s)?

② The Village residences are normally co-ed, are there any reasons why you cannot reside in a co-ed residence?

Are you applying for: Semester 1, 2012 Semester 2, 2012 Full Year, 2012

(Please note that single Semester accommodation is only available to students enrolled at Flinders University for a single semester. All other applicants are by default requesting one full academic year of accommodation)

③ YOUR PERSONAL DETAILS

Family Name: _____ Given Name(s): _____ Title: _____

Please indicate the name by which you prefer to be known: _____

Date of Birth: (dd/mm/yy) _____ Gender: Male Female

Religion (optional): _____ Smoker: Yes No

Country of Birth: _____ Nationality: _____

Country of Citizenship: _____ Country of Residence: _____

Aboriginal or Torres Strait Islander: Yes International Student?: Yes

④ CONTACT DETAILS: PERMANENT HOME ADDRESS

Street Number and Name: _____

City/Town: _____ State: _____ Country: _____

Post/Zip Code: _____ Telephone No.: _____ Mobile No: _____

Fax No: _____ Email Address: _____

⑤ EMERGENCY CONTACT

Emergency Name and Relationship to you: CHRISTI HOOVER, MANAGER OF STUDENT SERVICES

Same as Home Address: Yes If no, complete details below.

Street Number and Name: SUITE 107/1 ERSKINEVILLE RD.

City/Town: NEWTOWN State: N.S.W Country: AUSTRALIA

Post/Zip Code: 2042 Telephone No.: 2-9550-6337 Mobile No: _____

Fax No: 2-9550-6339 Email Address: AUSTRALIA@IFSA-BUTLER.ORG

⑥ NEXT-OF-KIN (NEAREST RELATIVE) CONTACT

N.O.K Name and Relationship to you: _____

Same as Home Address: Yes If no, complete details below.

Street Number and Name: _____

City/Town: _____ State: _____ Country: _____

Post/Zip Code: _____ Telephone No.: _____ Mobile No: _____

Fax No: _____ Email Address: _____

YOUR COURSE DETAILS

Are you an applicant at Flinders University or have you been accepted? Applicant Accepted

Flinders student ID number (for those accepted): N/A

In 2012 will you be studying Full Time OR Part Time

In 2012 will you be: Undergraduate Year Level: _____ Postgraduate

What is the name of your degree programme?: STUDY ABROAD

Are you currently or have you previously undertaken any University Studies: Yes No

⑦ University: _____ Degree Name: _____ Completed? Yes No

If you are a Study Abroad student what is the name of your Agency Organisation: IFSA-BUTLER

⑧ How long will you spend at Flinders? One Semester One Year Two+Yrs

Please note that single semester accommodation is only available to those enrolled at Flinders University for a single semester. All other applicants are by default requesting one full academic year of accommodation.

⑨ Secondary School attended: _____ Country: _____

Private School Government School School Boarder? Yes No

⑩ Have you lived in University Accommodation previously? Yes No

Residence Name: _____ Years Attended: _____ to _____ (eg, 1998 to 2000)

Have any members of your family lived in Flinders University Accommodation? Yes No

Their Name: _____ Relationship to you: _____

Residence Name: _____ Years Attended: _____ to _____ (eg, 1998 to 2000)

11 SPECIAL NEEDS

Medical Conditions:

All applicants are encouraged to provide the name of the regular practitioner or any other person from whom they are receiving continuing medical treatment for a chronic or recurring health problem and to authorise the Dean to contact that person in case of any health emergency. You may attach this information in an envelope marked "Confidential".

Physical Disability:

If you have any physical disability that could relate to your stay at a university college, please give details.

Dietary Requirements:

If you have any special dietary requirements, please give details.

Other Requirements:

If you have any other special requirements or needs, for example religious or cultural background necessitating a single sex environment, please give details.

12 PERSONAL PROFILE – This section provides us with information on how you can contribute to Flinders Housing during your stay and how we can tailor our activity schedule to suit our residents.

Cultural

| | Interest (1=High; 5=Low) Please circle | Proficiency (1=High; 5=Low) Please circle | Comments |
|-----------------|---|--|----------|
| Debating | 1 2 3 4 5 | 1 2 3 4 5 | |
| Drama | 1 2 3 4 5 | 1 2 3 4 5 | |
| Photography | 1 2 3 4 5 | 1 2 3 4 5 | |
| Public Speaking | 1 2 3 4 5 | 1 2 3 4 5 | |
| Reading | 1 2 3 4 5 | 1 2 3 4 5 | |
| Visual Arts | 1 2 3 4 5 | 1 2 3 4 5 | |
| Other: _____ | 1 2 3 4 5 | 1 2 3 4 5 | |

Musical

| | Interest (1=High; 5=Low) Please circle | Proficiency (1=High; 5=Low) Please circle | Comments |
|----------------|---|--|----------|
| Bass | 1 2 3 4 5 | 1 2 3 4 5 | |
| Clarinet | 1 2 3 4 5 | 1 2 3 4 5 | |
| Drums | 1 2 3 4 5 | 1 2 3 4 5 | |
| Flute | 1 2 3 4 5 | 1 2 3 4 5 | |
| Guitar | 1 2 3 4 5 | 1 2 3 4 5 | |
| Harp | 1 2 3 4 5 | 1 2 3 4 5 | |
| Piano/Keyboard | 1 2 3 4 5 | 1 2 3 4 5 | |
| Sing/Voice | 1 2 3 4 5 | 1 2 3 4 5 | |
| Trumpet | 1 2 3 4 5 | 1 2 3 4 5 | |
| Violin | 1 2 3 4 5 | 1 2 3 4 5 | |
| Other: _____ | 1 2 3 4 5 | 1 2 3 4 5 | |

Sport

| | Interest (1=High; 5=Low) Please circle | Proficiency (1=High; 5=Low) Please circle | Comments |
|--------------|---|--|----------|
| Athletics | 1 2 3 4 5 | 1 2 3 4 5 | |
| Basketball | 1 2 3 4 5 | 1 2 3 4 5 | |
| Cricket | 1 2 3 4 5 | 1 2 3 4 5 | |
| Football | 1 2 3 4 5 | 1 2 3 4 5 | |
| Gym | 1 2 3 4 5 | 1 2 3 4 5 | |
| Hockey | 1 2 3 4 5 | 1 2 3 4 5 | |
| Netball | 1 2 3 4 5 | 1 2 3 4 5 | |
| Soccer | 1 2 3 4 5 | 1 2 3 4 5 | |
| Swimming | 1 2 3 4 5 | 1 2 3 4 5 | |
| Table Tennis | 1 2 3 4 5 | 1 2 3 4 5 | |
| Tennis | 1 2 3 4 5 | 1 2 3 4 5 | |
| Walking | 1 2 3 4 5 | 1 2 3 4 5 | |
| Other: _____ | 1 2 3 4 5 | 1 2 3 4 5 | |

Other

| | Interest (1=High; 5=Low) Please circle | | | | | Proficiency (1=High; 5=Low) Please circle | | | | | Comments |
|-----------------------|---|---|---|---|---|--|---|---|---|---|----------|
| Amnesty International | 1 | 2 | 3 | 4 | 5 | 1 | 2 | 3 | 4 | 5 | |
| Charity Work | 1 | 2 | 3 | 4 | 5 | 1 | 2 | 3 | 4 | 5 | |
| Permaculture | 1 | 2 | 3 | 4 | 5 | 1 | 2 | 3 | 4 | 5 | |
| Recycling | 1 | 2 | 3 | 4 | 5 | 1 | 2 | 3 | 4 | 5 | |
| Other: _____ | 1 | 2 | 3 | 4 | 5 | 1 | 2 | 3 | 4 | 5 | |

13 FAMILY DETAILS

Number of Brothers and/or Sisters: _____

Parents Occupation(s): _____

FINANCIAL DETAILS

Please indicate how your fees will be paid (own income, parent/guardian, scholarship): IFSA-BUTLER

14 PERSONAL STATEMENT

Flinders requires a written personal statement of approximately 350 words explaining why you wish to live in Flinders Housing accommodation and how both you and Flinders Housing will benefit from your residency. Please either write your statement in the space below or type it in a separate document and return it with your completed housing application and personal reference.



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Personal Reference in Support of an Application for University Housing in 2012

This form should be given to a person, who is not a member of your immediate or extended family, who knows you well.

This form is an integral part of the application process and you are advised to return it with your application as soon as possible.

Applicant's Name: _____

Please comment under the following headings. Attach another sheet if you require more space. NOTE: A response addressing the following questions may be sent by email to mowens@ifsa-butler.org please quote the applicants full name in the email subject line as follows: John Smith – Personal Reference, 2012.

How well and in what capacity do you know the applicant?

Relationship with peers and people in authority

Social maturity and responsibility

In what way do you think the applicant is suited to living in a residential community?

Favourable qualities and characteristics

Name: _____

Signature: _____

Phone: _____ **Fax:** _____ **Email:** _____



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Academic Reference in Support of an Application for University Housing in 2012

This form should be given to someone who can comment on your academic history and interaction with peers, such as your Principal, Teacher, Lecturer or Tutor. This form is an integral part of the application process and you are advised to return it with your application as soon as possible.

Applicant's Name: _____

Please comment under the following headings. Attach another sheet if you require more space. NOTE: A response addressing the following questions may be sent by email to **(OR ATTACHED)** mowens@ifsa-butler.org, please quote the applicants full name in the email subject line as follows: John Smith – Academic Reference, 2012.

General academic ability

Attitude to independent study

Participation in extra-curricular activities

Social maturity and responsibility

Relationship with peers and teachers

Favourable qualities and characteristics

Suitability for residential accommodation

Name: _____

Signature: _____

Phone: _____ **Fax:** _____ **Email:** _____