



Professional Development Program Application Form

Graduate School of Business
University of New England Armidale NSW 2351
Phone: +61 2 6773 3382 Fax: +61 2 6773 3461
Web: www.gsb.une.edu.au
Contact: www.une.edu.au/askune

Notes

Necessary documents must be copies certified (notarised) by a Justice of the Peace. On completion of this form, check that you have included:

- Required documents and evidence of change of name, if applicable
- Birth certificate or evidence of Australian citizenship/permanent residency
- Evidence of English proficiency. Those applicants whose previous education was not in English must provide evidence of English Proficiency. UNE English Proficiency requirements are listed on the internet at <http://www.une.edu.au/rmo/policies/acad/englishlangreq.pdf>

Please complete the form and return to:

**Program Director, GSB
University of New England
Armidale NSW 2351, AUSTRALIA**

or Contact: www.une.edu.au/askune

Please direct enquiries to the Graduate School of Business on Telephone +61 2 6773 3382 Fax: +61 2 6773 3461 or contact: www.une.edu.au/askune.

A. Details of Applicant

Title (please tick) Dr: Mr: Mrs: Miss: Ms:

Are you a former UNE student? Yes No If Yes please supply Student Number _____

Family name _____

Given names _____

Any former family names _____

Sex (please tick) Male Female Date of Birth _____/_____/_____

Country of permanent residence _____

Postal address _____

Home address _____

Home telephone _____ Business telephone _____

Mobile telephone _____ Business fax _____

HomeEmail _____ Business Email _____

B. Additional Questions

Proposed Commencement Date Year _____ Trimester _____

How did you hear of about us? (WWW, newspaper (which one), word of mouth etc..) _____

Please indicate below which units you would like to nominate for. Refer to the schedule for details.

Unit code (eg. GSB738)	Unit Description (eg. Organisational Behaviour)