THE UNIVERSITY OF SYDNEY
ENROLMENT 2009

If you have not already pre-enrolled through MyUni, or if your Faculty does not permit web pre-enrolment, you must complete and lodge this form, together with any other forms required by your Faculty, at your Faculty Office, no later than 4.00 pm Friday, 31 October 2008. You may lodge the form in-person or fax it or mail it, but please do not fax it and mail it.

Please note that the University Senate has resolved that a candidate for an award program may not enrol concurrently in another award program that is not already an approved combined program unless approval is gained from the Dean/s of the relevant Faculty/ies.

It is in your best interests to complete your pre-enrolment well before the due date in order to avoid queues.

PLEASE ENSURE YOU PRINT CLEARLY

Section 1: To be completed by all students.

Student number: ................................................................. Family name: .................................................................

Award course: ................................................................. Given names: .................................................................

Do you expect to complete your award course by the end of 2009? If yes, tick this box □

Are you intending to suspend your candidature in 2009? If yes, tick this box □ and attach your application if the suspension has not yet been approved

Do you have a disability, impairment or long term medical condition which may affect your studies? If yes, tick this box □

If you do have a disability, impairment or long term medical condition, please indicate the area(s) of impairment by placing a tick in the appropriate box(es) below.

Hearing □ Learning □ Mobility □ Vision □ Medical □ Other □

Please indicate if you would like to receive advice on support services, or equipment and facilities which may assist you? If yes, tick this box □

Section 2: To be completed by Postgraduate Research Candidates only.

Is it your intention to re-enrol in your current award course in 2009? If yes, tick this box □

If you are re-enrolling in 2009 will you be full–time, tick this box □ or part–time, tick this box □

(Please note: Faculty permission must be obtained for a change to your full or part–time attendance.)

Section 3: To be completed by Bachelor of Medicine/Dentistry/Veterinary Science Students only.

Please circle your 2009 Enrolment Year. 1 – 2 – 3 – 4 – 5 – 6

Section 4: Unit of study choices to be completed by: 1. Coursework Postgraduate students or, 2. Undergraduate students enrolled in Faculties other than Medicine, Dentistry and Veterinary Science.

Note that the correct unit of study code is essential.

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<th>Unit of Study Name</th>
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* Record the session which is associated with your unit of study preference.

Section 5: To be completed by Undergraduate Architecture, Science, Sydney College of the Arts and Economics students.

Please state your intended award course major(s) or stream e.g. Accounting, History, Chemistry etc. .................................................................

Lodge this form at your Faculty Office NO LATER THAN 4.00 pm Friday 31 October 2008.

As a condition of my enrolment, I agree that I will comply with the By-laws and Regulations of the University of Sydney.

Signature ........................................................................................................... Date / / 2008

Daytime Telephone Number: .......................................................... Email Address: .................................................................................................