Dear Prospective Student,

Thank you for considering the Bachelor of Emergency Health (Paramedic) at the Peninsula Campus of Monash University as a study preference for 2007.

For current year-12 applicants, admission offers will be decided on the basis of your responses to questions contained in this application form, and your ENTER (for Victorian students) or equivalent scores for other states.

For non-year 12 applicants, admission offers will be decided on the basis of relevant post-secondary study, and responses to questions contained in this application form. Transcripts and other documents confirming results in post-secondary courses that you attach to this application must be legally certified copies.

Please complete the application form and return all documents to the address below:

Administrative Officer
Monash University
Centre for Ambulance and Paramedic Studies
PO Box 527
FRANKSTON VIC 3199

This information must reach the University by the closing date published in the VTAC guide. If you need any further information you may contact the Administrative Officer at enquiries.paramedics@med.monash.edu.au, or on (03) 9904 4368.

Yours sincerely

Bill Lord
Course Coordinator
Bachelor of Emergency Health (Paramedic)

APPLICATION FORM 2007

**Instructions**

- The purpose of this form is to assist in the ranking and selection of candidates for the Bachelor of Emergency Health (Paramedic) course. Applicants must also apply for admission to this course through VTAC (www.vtac.edu.au).
- If you are a non-year 12 leaver in 2006 and you have completed post-secondary education other than at Monash, you must attach a legally certified copy of your results. People who can certify documents include: Justice of the Peace, Barrister, Solicitor, Police Officer, Minister of Religion, School Principal, Town Clerk, Shire Secretary, Bank Manager, Doctor, Dentist, Pharmacist, Veterinary Surgeon, Accountant.
- Please do NOT send original documents as they are not normally returned. If supporting documentation is not available at time of mailing, please enclose an explanatory note indicating an anticipated supply date. Do not include any folders or plastic binding material. All photocopies to be A4 size. No faxed material will be accepted.
- Where results become available after the lodgement of this form, applicants are required to immediately provide these results to the Centre for Ambulance and Paramedic Studies.
- Please make sure that you securely attach to this form any documentation, such as certified results or responses to the statements or questions contained in this form.
- It is important that you complete all details and sign this form.
- Where your contact details change after the lodgement of this form it is your responsibility to notify the Centre for Ambulance and Paramedic Studies - Phone 9904 4327, email: enquiries.paramedics@med.monash.edu.au
- Applicants must return this form no later than the closing date published in the VTAC guide. Applicants who add or change preferences after this date must ensure that this application is received at the address below at within 5 days of the final close of preference date.

Please return to: Centre for Ambulance and Paramedic Studies
Peninsula Campus
PO Box 527
Frankston, Victoria, 3199

**VTAC Application Number**

Applicants must ensure that they have applied for admission to this course through VTAC

**Personal Details**

<table>
<thead>
<tr>
<th>Title</th>
<th>Surname</th>
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| Given Names |

<table>
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<tr>
<th>Sex</th>
<th>M</th>
<th>F</th>
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| Date of Birth | / | / |

| Preferred email address for Monash correspondence |

| Have you previously applied and/or studied at Monash University? | Yes | No |

| If YES, please state Monash ID Number (if known) |

<table>
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<tr>
<th>Postal Address (for correspondence)</th>
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| Number & Street |

| Suburb | State |

| Country | Postcode |

| Phone (AH) | Phone (BH) |

| Mobile Number | Facsimile |
Post secondary education record – non year 12 applicants (please provide a certified copy of academic transcripts/results)

1. Course
Institution
State Country
Year Commenced / / Year Completed / / Years enrolled
Did you complete this qualification? Yes ☐ No ☐

2. Course
Institution
State Country
Year Commenced / / Year Completed / / Years enrolled
Did you complete this qualification? Yes ☐ No ☐

TO BE COMPLETED BY ALL APPLICANTS

Please answer the following questions on separate sheets of paper (a maximum of 200 words each) and attach securely to this form.

1. Summarise your reasons for selecting this course of study. Your answer must demonstrate an understanding of the nature of the discipline and provide clear examples of factors that have influenced your choice of study.

2. What activities (paid employment or voluntary) have you undertaken, in addition to your studies, that provide evidence of your motivation to study this course? Attach references if appropriate.

3. Paramedics need to be able to work as a member of a team as well as take professional responsibility for the patient under their care. Please provide examples of activities that you have undertaken that demonstrate teamwork and leadership.

4. List any other information that you believe is relevant to your application, and include relevant references. Please provide original or certified copies of documentation to support your statement.

I declare that the information supplied on this form and the information given in support of my application is correct and complete. I acknowledge that the provision of incorrect information or the withholding of relevant information relating to my application and/or academic transcript may result in the withdrawal of an offer of a place in the course.

The primary purpose for which the information is collected is to record the details of your application and for selection into the Bachelor of Emergency Health (Paramedic). If you choose not to answer all the questions on this form, it may not be possible to assess your application. You have a right to access personal information that Monash University holds about you, subject to any exceptions in relevant legislation. The University’s statement on privacy is available at: www.privacy.monash.edu.au. Should you wish to seek access to your personal information or enquire about the handling of your personal information, please contact the University Privacy Officer on 9905 6011.

Applicant’s Signature: Date / / 

Please tick one of the following:

☐ I require notification that this application has been received (you must enclose a self-addressed stamped envelope)

☐ I do not require notification that this application has been received