SAS 01A

FIJI NATIONAL UNIVERSITY

www.fnu.ac.fj

STUDENT ID NUMBER

APPLICATION FOR ADMISSION TO UNDERGRADUATE PROGRAMME

- Please complete All the sections
- Tick boxes where applicable

A. PERSONAL DETAILS

Title: Mr. ☐ Mrs. ☐ Miss. ☐ Ms. ☐

First Name: .....

Surname: .....

Other Names: .....

Father's/Mother's Name: .....

Birth Certificate Registration Number: .....

Date of Birth: .....

Gender: Male ☐ Female ☐

Country of Citizenship: .....

Place of Birth: .....

Province (Fiji): .....

Tax Identification Number (TIN): .....

Passport Number: .....
(Regional/International)

Attach a recent full face passport-size colour photograph, measuring 3.5cm x 4.5cm. It must be certified to be a true likeness of you.

B. PROGRAMME OF STUDY

Year: ..... **Term Applied for:** Semester ☐ Quarter ☐ Trimester ☐ Summer ☐ Short Course ☐

Programme	Major 1	Major 2	Preferred Campus
1.			
2.			
3.			

C. ADDRESS

Postal Address: .....

Email Address: ***(for emailing Offer Letter)*** .....

Residential Address: .....

Phone Contact: Mobile: ..... Landline: .....

Contact Person in case of Emergency

Name: .....

Relationship: ..... Phone: .....

Residential Address: .....

D. FUNDING DETAILS

Private ☐ **Sponsored** ☐ **Sponsor's Name (if sponsored):** .....

E. ACADEMIC QUALIFICATIONS

SECONDARY QUALIFICATION(S) ATTAINED

Last Secondary School Attended: .....

Highest Secondary Qualificaton: ..... Last Year at School: .....

Qualification: Year 10 or Equivalent

School Name: .....

.....

Index Number: ..... Year: .....

Subject	Mark
Total (English + 5 Best)	

Qualification: Year 12 or Equivalent

School Name: .....

.....

Index Number: ..... Year: .....

Subject	Mark
Total (English + 3 Best)	

Qualification: Year 13 or Equivalent

School Name: .....

.....

Index Number: ..... Year: .....

Subject	Mark
Total (English + 3 Best)	

E. ACADEMIC QUALIFICATIONS *Continued*

TERTIARY QUALIFICATION(S) ATTAINED:

Qualification Title	Institution	Year Started	Year Completed

F. EMPLOYMENT EXPERIENCE(S) *Details are required to access admission eligibility in absence of appropriate academic background*

Position	Organisation	Years

G. MEDICAL HISTORY/SPECIAL NEEDS

Please indicate whether you have any medical condition(s) or major illness (es) or any disabilities that FNU should be aware of *(attach medical certificate and support letter from Special Schools and Disabled Peoples Organisations if applicable).*

YES ☐ **NO** ☐

Provide details if Yes and specify the special requirements you will need while studying at the Fiji National University:

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.....

.....

H. FIRST GENERATION STUDENT *(Please Tick)* ***Note: Immediate family may include your parents, guardians and siblings***

Please indicate whether you are the first in your immediate family to attend a Tertiary Institute.

Yes ☐ **No** ☐

I. CHECKLIST CONFIRMATION *(Please Tick)*

The application will not be processed if the following photocopied and certified true copies of documents have not been attached:

☐ Birth Certificate	☐ Passport Size Photo	☐ Secondary School Result(s)
☐ Copy of Bio data page of passport *(for regional/International Applicants)*	☐ Tertiary Qualification Result(s) *(If Applicable)*	☐ Letter from Employer *(If Applicable)*
☐ Tax Identification Number (TIN) Letter/ FRCA Card	☐ Medical Certificate and support letter from SECTION G *(If Applicable)*	☐ Affidavit of Parental Consent *(For students under 18 years of age)*

Please click on the link to access Affidavit of Parental Consent Form: https://www.fnu.ac.fj/wp-content/uploads/2021/01/AFFIDAVIT-OF-PARENTAL-CONSENT-FORM.pdf

J. APPLICANT'S DECLARATION

1. I declare to the best of my knowledge that all the information supplied with this application form is true and complete in all significant particulars. I authorise the Fiji National University to collect from, and disclose to appropriate third parties such information that it may require to establish and administer my account with the University. I undertake to comply with the rules and regulations of the Fiji National University. I fully understand that making a false declaration is an offence under the law. The University reserves the right to report the matter to the Police for any breach of National Law.

2. I confirm that I have read and understood FNU's Child Protection Policy and agree to comply with it. I understand that a breach of this Policy may provide grounds for my studentship with FNU to be terminated. I also understand that a breach of this Policy could result in criminal prosecution. I confirm my willingness to participate in FNU training sessions on Child Protection Policy.

Please click on the link to view the Child Protection Policy: https://www.fnu.ac.fj/wp-content/uploads/2023/09/2021-Child-Carev_V6.pdf

Applicant's Signature: _____ **Date:** _____

(Typing your name is considered as signature in this form) *DD/MM/YYYY*

K. COMPLETED APPLICATION FORMS

The completed application form (s) are to be emailed to the email address below:

Email: admission@fnu.ac.fj