

Student Financial Declaration Form

STUDENT DETAILS

Title:	Surname:	Given Name(s):
Correspondence Address:		
Permanent Home Address:		
Proposed Course of Study:		
Date of Birth:	Passport Number:	

STUDENT DECLARATION

I declare that I have a genuine intention to study the course for which I have applied, and that I have or intend to apply for access to sufficient funds to cover tuition fees, Overseas Student Health Cover, and living expenses for the duration of my studies.

I confirm that I have reviewed the following websites:

- Department of Immigration and Citizenship [DIAC]: <http://www.immi.gov.au/students/students/573-4/financial.htm>
- Overseas Student Health Cover: <http://www.ecu.edu.au/international/study-in-australia/moving-to-perth/studying-in-perth/overseas-health-cover>
- Edith Cowan University Fees Calculator: <http://fees.ecu.edu.au/>

The funds I will need to have access to for the **full duration** of study are as follows:

Expenses	Per Person (complete as appropriate)	Amount required in AUD\$	Number of family members/ children	Amount in AUD\$	I confirm that I have access to these funds (✓)
Travel	Yourself	Return air fare to Australia			
	Family members	One return air fare to Australia for each additional family member			
Tuition	Yourself	Course fees			
	Children aged 5-18	AUD 8,000 per year / per child			
Living	Yourself	AUD 18,000 per year			
	Partner	AUD 6,300 per year			
	First child	AUD 3,600 per year			
	Each additional child	AUD 2,700 per year			

My anticipated total expenses will be AUD\$ _____ which will be funded from the following sources:

	Personal or Family Savings	Bank Loan	Sponsorship	Other
Amount (\$)				

Name of Sponsorship / Scholarship / Loan provider: _____

I confirm that these funds are genuine and are to be used for no other purpose than to support me in my course of study. I am fully aware that any false or misleading statement may result in an automatic denial of my admission request or subsequent cancellation of my enrolment at the University, which in turn may affect the validity of my visa.

Signature of applicant: _____ **Date:** _____

WITNESS DECLARATION

I confirm that I have viewed a valid form of ID and that this "Student Financial Declaration Form" has been signed in my presence by _____.

Signature of authorised witness: _____ **Witness stamp (if applicable):**

Name of authorised witness: _____

Qualification as witness: _____

Address of witness: _____

AUTHORISED WITNESSES

- Authorised ECU Representative
- Academic (post-secondary institution)
- Accountant
- Architect
- Australian Consular Officer
- Australian Diplomatic Officer
- Bailiff
- Bank Manager
- Chartered secretary
- Chemist
- Chiropractor
- Company auditor or liquidator
- Court officer (magistrate, registrar or clerk)
- Defence Force officer
- Dentist
- Doctor
- ECU Exchange Partner
- ECU Study Abroad Partner
- Electorate Officer (State – WA only)
- Engineer
- Industrial organisation secretary
- Insurance broker
- Justice of the Peace (any State)
- Lawyer
- Local government CEO
- Local government councillor
- Loss adjuster
- Marriage Celebrant
- Member of Parliament
- Minister of religion
- Nurse
- Optometrist
- Patent Attorney
- Physiotherapist
- Podiatrist
- Police officer
- Post Office Manager
- Psychologist
- Public Notary
- Public Servant
- Real Estate agent
- Settlement agent
- Sheriff or deputy Sheriff
- Surveyor
- Teacher
- Tribunal officer
- Veterinary surgeon