



NOTICE OF EXPECTED COMPLETION

POSTGRADUATE

MACQUARIE UNIVERSITY/OPEN UNIVERSITIES AUSTRALIA

MQ Student Number: _____ Course: _____

Family name: _____ Other name: _____

Mailing address: _____

State: _____ Postcode: _____ Country: _____

E-mail Address: _____

Completed units of study

	Unit code	Course/Degree	Completed/Credited
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____
11.	_____	_____	_____
12.	_____	_____	_____

CHECKLIST

- I have completed the specified units of study in the Macquarie University degree, as specified in the OUA Handbook.
- I have followed the degree requirements for the program.
- I have completed the listed units within the past 10 years.

Please note:

- a. In no case shall the award be conferred more than once on the same candidate.
- b. Around two months before the graduation date, you will receive a letter from the University regarding graduation arrangements.
- c. Students who submit this form during SP4 or SP1 may be able to graduate at the following Spring ceremony (September) in Sydney.
- d. Students who submit this form during SP2 or SP3 may be able to graduate at the following Autumn ceremony (April) in Sydney.

STUDENT DECLARATION

I declare that the information provided on this form is correct.

Signature Date

When completed, return this form to:

OUA Program Manager, Centre for Open Education, Macquarie University, NSW 2109

☎ + 61 2 9850 9274

Fax: + 61 2 9850 7480

OFFICE USE ONLY

Course: Grad Cert in Policy & Applied Social Research
GC-PASR;OUA

PG Cert in Policing, Intelligence & Counter Terrorism
PC-PICT;OUA

PG Dip in Policing, Intelligence & Counter Terrorism
PD-PICT;OUA

Masters of Policing, Intelligence & Counter Terrorism
MPICT;OUA

Completion requirements met Completion requirements not yet met

Still to complete: _____

Graduation ceremony

Signature Date

Statistical Information

It is a requirement of the Australian Department of Education, Science and Training (DEST) that you provide this information.

- 1) Citizenship and residence status:
- Australian citizen (including Australian citizens with dual citizenship).
 - New Zealand citizen.
 - Students with permanent resident status, but excluding those who have New Zealand citizenship.
 - Students with a temporary entry permit.
 - Students with a status other than one of the above.
- 2) Are you residing in Australia during the study period? Yes No
- 3) If you were not born in Australia, what year did you first arrive in Australia?
- 4) What is your country of citizenship?
- 5) In what country were you born?
- 6) Do you speak a language other than English at your permanent home residence?
 Yes No
If yes, what is the non-English language that is spoken most often?
- 7) Are you of Aboriginal or Torres Strait Islander origin?
 No Australian Aboriginal Torres Strait Islander
- 8) Disability, impairment or long-term medical condition. This information is collected for the purposes of providing support.

Indicate any area/s of impairment:

- | | | |
|----------------------------------|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Hearing | <input type="checkbox"/> Vision | <input type="checkbox"/> Learning |
| <input type="checkbox"/> Medical | <input type="checkbox"/> Mobility | <input type="checkbox"/> Other |

Indicate any support requirements:

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Declaration

I declare that the information on this form is complete and correct.

Signature: Date: