

**Application for Admission**
**CONFIDENTIAL**
**MASTER IN COUNSELLING**

Ref:
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**Closing Date:**



**NOTES:**

- Award to be conferred will be in the name of MONASH UNIVERSITY, and students may apply to receive the award upon successful completion of their course.
- Checklist.** The completed application form must be accompanied by the following items:-
  - Certified copy of degree(s) and transcript(s)
  - Certified copy of professional qualification(s)
  - Application fee
 (Cheque should be crossed in favour of Kaplan Higher Education Institute Pte Ltd)
- The completed application package should be returned to:**

 Director, Monash Masters Programs  
 Kaplan Higher Education Institute  
 51 Cuppage Road #02-01  
 Singapore 229469

 Telephone: (65) 6733 1877  
 Fax : (65) 6225 3605  
 Email : info@kaplan.com.sg

Office Use
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**1. PERSONAL DETAILS**

Surname	Sex - Please tick (✓) <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status
Other Names	Age	NRIC or Passport No.
Residence Address - <input type="checkbox"/> Please tick if you wish correspondence to be sent to this address	Nationality	Date of Birth /           /
	Place of Birth	Telephone: RESIDENCE
Residence Email Address:		
Business Organisation & Address - <input type="checkbox"/> Please tick if you wish correspondence to be sent to this address	Telephone: BUSINESS	
	Handphone/Pager	
Business Email Address:		

**2. STUDY PROGRAM**

Course	Semester	Year
<input type="checkbox"/> EDF 6531      Counselling for the Professions		
<input type="checkbox"/> EDF 6533      Cognitive-Behavioural Approaches to Crucial Issues in Living		
<input type="checkbox"/> EDF 6540      Ethics in Counselling		
<input type="checkbox"/> EDF 6541      Field Experience in Counselling		
<input type="checkbox"/> EDF 6530      Introduction to Counselling Across the Lifespan		
<input type="checkbox"/> EDF 6532      Assessment in Counselling		

<b>OFFICE USE ONLY</b> Accepted by Monash University    ..... Date            /            / Authorising Officer	Comments:-
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### 3. COMMENCING TERM AND YEAR

<input type="checkbox"/> Term 1 January-March	<input type="checkbox"/> Term 2 April-June	<input type="checkbox"/> Term 3 July-September	<input type="checkbox"/> Term 4 October-December
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### 4. EDUCATION QUALIFICATIONS

*Certified copies of degree, diploma, certificate, and official transcripts must be attached.*

University	Year	University/College	Location	Award	Grade
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	Year	University/College	Location	Award	Grade
.....					
Professional/Other Qualifications	Year	Professional Body	Examination	Letters	
.....					
Prizes, Awards, or Scholarships gained					

### 5. ENGLISH LANGUAGE PROFICIENCY

State in which way you fulfill the Faculty's English Language proficiency requirements by ticking the appropriate statement below. Documentary evidence must be provided in all cases. For further information please consult the guidelines available from the Faculty of Education.

I have passed my secondary studies, which were conducted entirely in English medium

I have passed my tertiary studies (of three years or longer) which were conducted entirely in English medium

I have completed and passed a research degree for which the dissertation was written in English

I have achieved a score of no less than 577 on the TOEFL (computer based score of 233) and 4.5 on the TWE

I have achieved a score of no less than 6.5 (no individual score below 6.0) on the IELTS

I have rated as 3+ on the ASLPRs for all skills

I have satisfactorily completed the Direct Entry Program at MUELC

*Applicants who wish to study programs in TESOL must have the following English proficiency scores: IELTS - 7, TOEFL - 600 (computer based score of 250, TWE - 5, ASLPR - 4+.*

### 6. CAREER SUMMARY

Present Occupation	Job Title	Since (Year)	Number of years employed in position = <input type="checkbox"/>
	Organisation/Employer		Are you sponsored? Yes                      No
Previous Employment	Year	Job Title	Organisation/Employer

**7. STATISTICAL INFORMATION** Residential, citizenship, language and educational details required by the Australian Government

a) In what country is your permanent home residence?	b) In what country will you reside during the enrolment period?
c) In what country were you born?	d) If you usually speak a language other than English at your permanent home residence, please write the main non-English language in this box.
e) Of what country are you a citizen or permanent resident?	

**8. ACADEMIC / PROFESSIONAL REFERENCE**

_____ Name
_____ Professional / Position
_____ Address

**9. ADDITIONAL INFORMATION**

(a) Please indicate how you came to know about this course for which you are applying. <input type="checkbox"/> Newspaper: _____ <input type="checkbox"/> Brochure mailer <input type="checkbox"/> From a friend or colleague <input type="checkbox"/> Internet <input type="checkbox"/> From our student: Name: _____ Intake No: _____ Program: _____
(b) Are you sponsored by any organisation? Yes / No

**10. DECLARATION**

I declare that the information supplied on this form, and the information given in support of my application for enrolment as a student, are correct and complete to the best of my knowledge, and I undertake to comply with the rules and regulations governing the conduct of my course, for the duration of my enrolment in the course.	_____ Applicant's Signature
	_____ Date / /

*The information on this form is collected for the primary purpose of assessing your application. Other purposes of collection include the creation of a record on the student database, attending to administrative matters, corresponding with you and statistical analyses. If you choose not to complete all the questions on this form, it may not be possible for the Faculty of Education to assess your application. Personal information may also be disclosed to the education institutions or your employer(s) to make an informed decision about the application or matters that concern the student's enrolment at Monash. You have a right to access personal information that Monash University holds about you, subject to any exceptions in relevant legislation. If you wish to seek access to your personal information or inquire about the handling of your personal information, please contact the University Privacy Officer on 61 3 9905 6011.*

**Professional Referee Report - Confidential  
Master in Counselling**

PERSONAL DETAILS - To be completed by the applicant before forwarding form to referee

Title	Surname	Given Names
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REFEREE REPORT - TO BE COMPLETED BY THE REFEREE. This form must be forwarded to the referee and returned by them directly, to:

Kaplan Higher Education Institute  
Kaplan City Campus  
51 Cuppage Road  
#02-01 Singapore 229469

Name	Contact Number
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Position	Employer
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1. How long have you known the applicant? \_\_\_\_\_

2. In what capacity have you known the applicant? (including you role, applicant's role and work context)

Referee's role and work context:

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Applicant's role and work context:

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3. Please rate applicants' characteristics and competencies using a 5-point scale (1 = not very well, 5 = excellent)

Is the applicant

Well known to you?	1	2	3	4	5
Self-motivating?	1	2	3	4	5
Able to meet deadlines?	1	2	3	4	5
An empathic listener?	1	2	3	4	5
Able to work as a team member?	1	2	3	4	5
Able to get on with staff?	1	2	3	4	5
Able to express themselves verbally?	1	2	3	4	5
Able to write professionally?	1	2	3	4	5

4. What are the applicants' strongest competencies in the areas of counselling?

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5. What are the counselling competency areas the applicant needs most to develop?

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6. Overall, my support for this applicant for the course in:

- Unreserved     Strong     Fairly Strong     Moderate     None at all

7. Comments (optional)

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#### Referee's Signature

Under the information Privacy Act an individual may seek access to personal information that Monash University holds about them. If the individual whom this referee report is about seeks access to the report:

- I consent to the entire report (including my name) being released to the individual; or  
 I do not consent to my name being released to the individual and I confirm that this information is provided in confidence

Signature: ..... Date / /

*The information on this form is collected for the primary purpose of providing a referee report on the suitability of an applicant. Other purposes of collection include attending to administrative matters. If you choose not to complete all the questions on this form, it may not be possible for the Faculty of Education to assess the application for admission. You have a right to access personal information that Monash University holds about you, subject to any exceptions in relevant legislation. If you wish to seek access to your personal information or inquire about the handling of your personal information, please contact the University Privacy Officer on 9905 6011.*