



STUDENT ID NUMBER

Input boxes for Student ID Number

www.fnu.ac.fj

HIGHER DEGREE BY RESEARCH APPLICATION FOR ADMISSION FORM

- Please complete All the sections
Tick boxes where applicable

A APPLICANT DETAILS

Form section A containing fields for Title, Gender, First Name, Surname, Other Names, Father's / Mother's Name, Birth Registration Number, Date of Birth, Postal Address, Phone Contact, Email, and Contact Person in case of Emergency.

B PROGRAMME OF STUDY

Form section B containing fields for Term Applied, Mode of Study, Programme, and questions regarding potential supervisors and research topics.

Select the College in which you wish to undertake your research course:

- College of Agriculture, Fisheries and Forestry College of Humanities and Education
 College of Business, Hospitality, and Tourism Studies College of Medicine, Nursing and Health Sciences
 College of Engineering, Science and Technology

C SCHOLARSHIP / SPONSORSHIP DETAILS

- Private Sponsored

Sponsors Name if sponsored: _____
 [Note: Please attach Sponsor Letter if sponsored]

D ACADEMIC QUALIFICATIONS

TERTIARY QUALIFICATIONS ATTAINED

	Qualification Name	Institution	Majors	Duration	GPA / Grade
Bachelor degrees					
Master Degrees					
Other Qualifications					

E EMPLOYMENT EXPERIENCE(S) *Details are required to assess admission eligibility in absence of appropriate academic background

Date of Employment	Position	Name of Organisation

F SPECIAL NEED OR SUPPORT REQUIRED AS A CONSEQUENCE OF ANY DISABILITY OR MEDICAL CONDITION

- No Yes – please indicate below (provide medical evidence)
 Vision Hearing Learning Medical
 Mental Health Physical Other _____

If you have ticked yes to any disability or health condition, would you like to be contact FNU to discuss reasonable adjustments to support your studies.

- Yes No

G CHECKLIST

Please check and confirm that the following certified true copies documents are attached. (Please tick the box)

- Birth Certificate Passport Size Photo
 Tertiary Qualification Transcripts Copy of Biodata page of passport (for Regional / International applicant)
 Tax Identification Number (TIN) Research Interest (no more than 1,000 words)

H APPLICANT DECLARATION

I declare that to the best of my knowledge all information supplied with this application form is true and complete. I undertake to comply with the rules and regulations of the Fiji National University including the Child Protection Policy. I fully understand that making a false declaration is an offence under the law.

Please click on the link to view all Fiji National University Policies: <https://www.fnu.ac.fj/new/abtus/poli-regltns>

Applicant's Signature: _____ Date: _____
(Typing your name is considered as signature in this form)

If you are a current FNU staff member please include your staff ID number:

Have you previously studied at, or applied to, the Fiji National University?

No

Yes (Please provide ID number on top left of page 1)

I COMPLETED APPLICATION FORMS

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

Email: admission@fnu.ac.fj

