



FIJIAN IMMIGRATION DEPARTMENT

Applicant Declaration

1. I declare the information given is complete, correct and up-to-date.
2. I understand that a decision on this application will be made on the basis of the documentation I have provided to the Fijian Immigration Department.
3. I am aware this Application may be unsuccessful if all required documentation is not provided at time of lodgment.

Signature: _____ Date: _____

NO.	APPLICATION FOR STUDY PERMIT CHECKLIST	NEW		EXTN.	
		YES	NO	YES	NO
1.	Completed and signed application form			N/A	
	<ul style="list-style-type: none"> • Copy of applicants bio-data page • Two (2) passport size photo 				
2.	Applicant's Request Letter				
3.	Medical Report [<i>conducted within 3 months or less from date of application</i>]			N/A	
4.	Police Report [<i>over 18 years old from country of citizenship/residence</i>]				
5.	Local Police Report [<i>over 18years old for any foreign student who has studied for 12 months or more in Fiji</i>]	N/A			
6.	Acceptance Letter [<i>from Institution/School</i>]				
7.	Sponsored Students				
	<ul style="list-style-type: none"> • Tuvalu Gov't Scholarship Award/Bond • Solomon Gov't Scholarship Award • Vanuatu Gov't Scholarship Award • Tokelau Gov't Scholarship Award • Kiribati Gov't Scholarship Award • Aus AID Sponsor • NZ AID Sponsor 				
8	Self-Sponsored students				
	<ul style="list-style-type: none"> • Letter from Sponsor • Copy of Confirmed Return Air Ticker/Bond • Financial Statement [<i>from Sponsor eg. Bank Statement/Pay Slip</i>] 				
9	Consent Letter from Parents [<i>Secondary School Students under 18years old</i>]			N/A	
10	Letter of Support [<i>from Local Guardian/Local Sponsor</i>]				
11	Certified Copy of Birth Certificate			N/A	
12	Fees:				
	<ul style="list-style-type: none"> • Regional Students [<i>for Tertiary Education</i>] • Regional Students [<i>Secondary/Tertiary School students over 18years old</i>] 			Exempted	
				\$313.00	
13	Copy of Vaccination Card				

14.	Email	
15.	Contact Details	
<i>For official use only</i>		
i	CSO - Name:	Date:
ii	Customer - Name/Phone/E-mail:	Date:
iii	CSO's comments on pending documents (<i>First Vetting</i>):	Date:
	CSO's comments on pending documents (<i>Second Vetting</i>):	Date:
Final checks and endorsement		
iv	CSO Name:	Date:
PLEASE ENSURE THAT ALL DOCUMENT SUBMITTED ARE IN ENGLISH ONLY AND INCOMPLETE APPLICATION WILL NOT BE ACCEPTED.		