



Acceptance Form

Please type in the boxes below, then print and sign your name. You must then upload this document to eStudent when you accept your offer

Family Name:		Given Name:	
Macquarie ID:		Faculty:	
Program Offered (see offer letter):		PHD	MPHIL
Full Program Title:			
<p>Select Your Course Start Date. Note that your course start date must fall within the session indicated in your offer letter. Session 1 is from January-June and Session 2 is from July-December.</p> <p style="text-align: center;"> February 1st July 1st April 1st Oct 1st </p>			
Scholarship offered? <input type="checkbox"/> Yes Allocation No: _____ <input type="checkbox"/> No		Type of Scholarship (if applicable): <input type="checkbox"/> RTP <input type="checkbox"/> MQRES <input type="checkbox"/> Other _____	

I **accept** the offer of candidature and scholarship (if applicable) as stated on the offer letter. I have read, understood and accepted the conditions outlined in the **letter of offer** and the **Terms and Conditions and Important Information**. I also understand that I am responsible for keeping a copy of my offer letter, Terms and Conditions of my Graduate Research Offer, Declaration of Acceptance, and receipts of any payments of tuition fees or non-tuition fees.

Signature: _____ Date: _____ / _____ / _____
Day Month Year