

APPLICATION FOR ENROLMENT

To avoid delays in processing your application, all sections must be completed.

STUDENT DETAILS (SAME AS YOUR PASSPORT)

Have you studied at Academies Australasia College(s)	Yes	No
Given Name / Middle Name		
Family Name(s)		
Date of Birth		Marital Status
Gender	Male	Female
Nationality		
Country of Residence		
Passport No.		Country of Issue

OVERSEAS ADDRESS

Address (Flat/Unit/House No., Street Address)

Suburb/Town/City/Municipality

State/Province/Division/Region

Country ZIP/Postal Code

Telephone (+Country Code, Area Code)

Email

AUSTRALIAN ADDRESS (if you are in Australia at the time of your application)

Address

Suburb State Postcode

Telephone

Mobile

Email

EMERGENCY CONTACT

Name

Relationship

Telephone

Email

VISA INFORMATION

Visa Type	Student Visa	Visitor (Tourist)	Working Holiday
	Other		

If you are applying for a Student Visa, are you applying

Offshore (outside Australia)

Onshore (within Australia)

UNIQUE STUDENT IDENTIFIER (USI)

Do you have a USI?

Yes, please provide details:

No, please apply for USI on the USI website (usi.gov.au) and provide details to the College.

COURSE YOU ARE APPLYING FOR

English

Preferred Start Date Course Duration (in weeks) weeks

Class preference (subject to availability*) Day Evening

*Check the website for course timetables

Academy of English (Sydney)

General English (Beginner to Advanced) CRICOS Course Code 0101722

EAP/IELTS Preparation (Intermediate to Advanced) CRICOS Course Code 0101723

Discover English (Melbourne)

General English (Beginner to Advanced) CRICOS Course Code 073679D

EAP/IELTS Preparation (Intermediate to Advanced) CRICOS Course Code 108079B

Other Course*

*Please refer to course page: <https://discoverenglish.vic.edu.au/>

Language Links (Perth)

General English (Beginner to Advanced) CRICOS Course Code 097129C

EAP/IELTS Preparation (Intermediate to Advanced) CRICOS Course Code 097774G

Other Course*

*Please refer to course page: <https://www.languagelinks.wa.edu.au/>

High School (Sydney Only)

Preferred Start Date Year

January April

Year 11 & 12 (Combined 2-year Course) CRICOS Course Code 049221E

Vocational Education Training (VET)

Please refer to our website <https://academies.edu.au/> for the offered courses

Course Name

Course Duration Preferred Start Date

Academies Australasia Institute

Preferred Campus Location Sydney Perth Armidale

Academies Australasia Polytechnic - AAPoly (Melbourne)

Australian College of Technology (Sydney)

Clarendon Business College (Sydney)

Skills Training Australia (Melbourne)

Supreme Business College (Sydney)

Higher Education

Preferred Start Date Year

March July September November

Preferred Campus Location

Course

EDUCATIONAL BACKGROUND

Name of Last School/College/University Attended _____

Highest Qualification _____
(e.g. High School Certificate, Diploma, Bachelor, etc)

Date Achieved _____

Certified copies of evidence of qualifications, statement of attainment and/or results must accompany your application. If you are currently studying in Australia, please attach your current electronic Confirmation of Enrolment (eCoE).

TRANSFERRING FROM ANOTHER SCHOOL (IF APPLICABLE)

Are you transferring from another School in Australia? Yes No

If YES, please submit a copy of your eCoE and certification documentation.

Do you have evidence of release from previous School? Yes No

If Yes, please provide evidence of release.

APPLYING FOR CREDIT TRANSFER (IF APPLICABLE)

Do you wish to apply for Credit Transfer (CT) or Recognition of Prior Learning (RPL)?

Yes No

If YES, please refer to the course credit section of the Student Handbook for further details. Complete the course credit application form (available at) and submit it with this application. Certified copies of evidence of qualifications, statement of attainment and/or results must accompany your application. Failure to provide the completed course credit application form and evidence of qualifications, statement of attainment and/or results may result in the application being disapproved.

ENGLISH PROFICIENCY

Depending on the course of study, an English placement test may be required before we can offer a place for that course.

English Examination:

IELTS Score: _____ Date of Test: _____

PTE Score: _____ Date of Test: _____

OTHER (please specify) _____

Score: _____ Date of Test: _____

Certified copies of English test result must accompany your application.

ACCOMMODATION

Do you require accommodation? Yes No

If Yes, please specify the type of accommodation

Homestay Hostel Shared Room Single Room

Bookings will not be made until payment and flight details are received. Please ensure you complete the homestay form.

AIRPORT PICK-UP

Do you require airport pick-up? Yes No

If Yes, please provide flight details at least 2 weeks prior to arrival

Airline Company _____

Flight Number _____ Arrival Date _____

OVERSEAS STUDENT HEALTH COVER (OSHC)

Student Visa applications are required to have visa length Overseas Student Health Cover (for at least 1 month longer than your course).

Do you require OSHC? Yes No

If Yes, please specify the type of OSHC Single Couples Family

SPECIAL NEEDS

Do you consider yourself to have a disability, impairment or long-term medical condition that may affect your studies? Yes No

If YES, please indicate the area/s of impairment.

Hearing Mobility Vision Learning Medical

Other _____

Support Requirements (if known) _____

CARER ARRANGEMENT

Students under the age of 18 must have a carer while they are in Australia. Please refer to the 'How to Enrol' section at www.academies.edu.au for further details.

Do you require carer arrangement? Yes No

HOW DID YOU HEAR ABOUT US?

Friend Internet Exhibition/ Seminar Social Media

Advertisement Other _____

USE OF PERSONAL INFORMATION

Student information may be shared between the College and the Australian Government and relevant regulatory authorities. This information includes personal details, contact information, course enrolment details and changes, and the circumstances of any suspected breach of student visa conditions.

APPLICANT DECLARATION

I declare that I have read the instructions and that the information submitted on and with this form is complete and accurate in all respects. I acknowledge that the provision of incorrect information may result in the withdrawal by the College of any place which may be offered. I agree to release and indemnify the College and its officers, employees, agents, partners and contractors from and against any liability, claim, action, demand, loss or expense (including legal costs) arising out of or in any way connected with the provision of incorrect information. I acknowledge that I am bound by the statutes and regulations of the College and I agree to pay all fees charged directly to me arising from this enrolment.

Applicant Name _____

Applicant Signature _____ Date _____

For applicants under the age of 18 (Parent/Guardian Consent is required for all applicants under the age of 18).

Parent / Guardian Name _____

Parent / Guardian Signature _____ Date _____

AGENT DETAILS

Are you applying through an education agent? Yes No

Agent Legal Name _____

Agent Trading Name (if different) _____

Contact Number _____

Email _____

Stamp of Agent