# International Student Enrolment Form

Pı	referred Course Commencement Date:		
*	Preferred Location (Please tick): Melbourne Adelaide	Geelong	Corio
	All the below qualifications are not available at our all locations, for mww.coe.vic.edu.au/international. Please tick the courses and preferre		ngly.
1.	Course (s) you are Applying for (Please tick)	Enroll in Course	RPL**
	General English program (ELICOS) Elementary to Advanced		
	SHB30416 Certificate III in Hairdressing		
	SHB40216 Certificate IV in Hairdressing		
	SHB50216 Diploma of Salon Management		
	SHB30115 Certificate III in Beauty Services		
	SHB40115 Certificate IV in Beauty Therapy		
	SHB50115 Diploma of Beauty Therapy		
	BSB50215 Diploma of Business		
	BSB60215 Advanced Diploma of Business		
	CPC30620 Certificate III in Painting and Decorating		
	CPC50210 Diploma of Building and Construction (Building)		
	SIT30816 Certificate III in Commercial Cookery	,	
	SIT40516 Certificate IV in Commercial Cookery	,	
	SIT50416 Diploma of Hospitality Management		
	RII60520 Advanced Diploma of Civil Construction Design	1	
	BSB8080120 Graduate Diploma of Management (Learning)		
	WEEKS 1	** Recognition of	
Н	ow many WEEKS do you want to study (ELICOS Only)? (Please w	vrite the weeks numb	er only)
_	<b>Weeks</b> (Confirmation of Enrollment will be issued as per your	requested weeks)	
D	o you wish to apply for any credit transfer?	Yes	No
D	o you wish to apply for any Recognition of prior learning (RPL):	? Yes	No
2.	. English Language Proficiency, (Please tick)		
En	glish was the language of instruction in your secondary/tertian	y studies Yes	No
Ìł	Documentary evidence must be provided if institution is located in a r nave completed an approved English language test (complete the c elevant evidence)		
	IELTS Academic score (Module)		
	Date taken		
	TOEFL Score		
	Data talaa		



PTE Academic Score	
Date taken	

# Or (Please tick)

I have successfully completed an English course in Australia (Attach Certificate)

English is my first Language

I have successfully completed COE English Proficiency test

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Family Name	
Given Names	
Date of Birth	
Gender (Male, Female or Indeterminate)	
Phone no (inc. Country Code)	
Email Address	
First language	
Citizenship (as in passport)	
Country of birth (as in passport)	

# 4. Passport Details:

Current passport no	
Issuing country	
Expiry date	

# 5. Address in home country (mandatory):

Address	
Post code/ ZIP code	
Country	
Mobile no	
Home phone	

6. Address in Australia (if you are already in Australia)



### 7. Are you a currently enrolled with any other Institute in Australia? (Please tick)

Yes	NO	If no, please go to the question no 8.

University / Institute	
Course	
Start Date	
End Date	
Current visa No.	
Visa Sub Class	
Visa Expiry date	

# 8. Educational Background: (Current Study) (Please tick)

Are you currently Studying?

Yes

No

If yes, please provide course and institution details below:

Institute / University	Institute / University
Course	Course
Start Date	Start Date
Expected finish Date	Expected finish Date

### 9. Your previous Schooling

What is your highest **COMPLETED** school level? (Please tick)

Never attended school Year 8 or lower

Year 9 or equivalent Year 10

Year 11 Year 12

In what YEAR did you COMPLETE this level:

# 10. Since leaving school, have you COMPLETED any of the following qualifications? (Please tick)

None Certificates other than I, II, III and IV

Certificate I Diploma Level (or Associate Diploma)

Certificate II Advanced Diploma or Associate

Degree

Certificate III (or Trade Certificate)

Certificate IV (or Advanced

Certificate/Technician

Bachelor Degree or Higher Degree Level



### 11. Reason for training/studying: (Please tick)

For personal interest or self-

development

To get a job

I want extra skills for my job

To start my own business

To get a better job or promotion

It was a requirement of my job

To try for a different career

To develop my existing business

Other reasons

12. Employment Status: (Please tick)

Full Time Employee

Part Time Employee

Self-employed – not employing others

**Employer** 

Employed – unpaid worker in a family

Unemployed – seeking full-time work

business Unemployed – seeking part-time work

Not employed – not seeking

employment

13. Occupation: (Please tick)

Manager

Technicians and trades workers

Professional

Community and personal Services

Workers

Clerical and Administrative Workers

Sales Workers

Machinery Operators and Drivers

Labourers

Other Services

Not Applicable

### 14. Description; (Please tick)

Agriculture, Forestry and Fishing

Mining

Construction

Electricity, Gas, Water and Waste

Services

Wholesale Trade

Retail Trade

Accommodation and feed Services

Transport, Postal and Warehousing

Financial and Insurance Services

Public Administration and Safety

Rental, Hiring and real Estate Services

Administration and Support Services

Healthcare and social Services

**Education and Training** 

Other Services

Not Applicable

15. RPL / Credit Transfer: (Please tick)

Are you applying for exemptions as a result of previous experience/study?

Yes

No

If you have selected "Yes", please attach translated copies of the course, subject outlines, subject descriptors, work experience letters and other relevant information.



# 16. Unique Student Identification Number - USI

As of the 1st of January 2015 you will be required to have a Unique Student Identifier – USI to be able to study in Australia.									Э	
Enter your Unique Student Identification Number (USI)										
From 1 January 2015, we, <b>THE Centre of Excellence</b> , can be prevented from issuing you with a nationally recognised VET qualification or statement of attainment when you complete your course if you do not have a Unique Student Identifier (USI). If you have not yet obtained a USI you can apply for it directly at <a href="http://www.usi.gov.au/create-your-USI/">http://www.usi.gov.au/create-your-USI/</a> .										
If you would like <b>THE Centre of Excellence</b> to apply for a USI on your behalf you must authorise us to do so and declare that you have read the privacy information at http://www.usi.gov.au/Training-Organisations/Documents/Privacy-Notice.pdf								nat		
I [Your Name]pursuant to sub-section 9(2) of the Student Identifiers Act 2 collection, use and disclosure of my personal information pur http://www.usi.gov.au/Training-Organisations/Documents/P	014, for a USI on suant to the inform	my l	behalf. I	have						
My Town/ City of Birth										
Signed										
17. ATSI Status										
Are you of Aboriginal or Torres Strait Islander O	rigin? (Please	tick	<)							
Yes, Aboriginal	Yes, Aborigina	al ar	nd Torr	es Sti	ait I	Islar	nder	-		
Yes, Torres Strait Islander	No, Neither Ab	oori	ginal r	or To	orres	Stro	ait Is	lan	der	
18. Language										
Do you speak a language other than English at hor (If more than one language, indicate the one that in 19. How well do you speak English? (Please tick)	s spoken most c		า)		Yes	;			No	)
Very well Well	ı	Not	well							
20. Medical Conditions: (Please tick)										
Do you suffer from any medical conditions?	Yes		No	)						
If yes, please specify:	•									
Do you have any learning support needs?	Yes		No	)						
If yes, please specify:										
21. Disability										
Do you consider yourself to have a disability, impairment or long-term condition? (Please tick)										
Hearing/ Deaf	Acquired E	Braiı	n Impo	airme	nt/	Me	enta	IIIIn	ess	
Physical	Vision									
Intellectual	Medical Condition									
Learning	Other (ple	ase	speci	fy):						
(This information is for support services only and will not aff	ect the outcome	of y	our app	olicatio	on)					



#### 22. Emergency Contact

Relationship to you			
Name			
Address		State	
Suburb		Post code	
Telephone			

#### 23. Privacy Statement

I understand that:

The Centre of Excellence is required to provide the Federal Government and Victorian Government, through the Department of Education and Early Childhood Development and other relevant regulatory authorities with student and training activity data which may include information I provide in this enrolment form. Information is required to be provided in accordance with the Victorian VET Student Statistical Collection Guidelines (which are available at

http://www.education.vic.gov.au/training/providers/rto/Pages/datacollection.aspx).

The Department may use the information provided to it for planning, administration, policy development, program, evaluation, resource allocation and reporting and/or research activities. For these and other lawful purposes, the Department may also disclose information to its consultants, advisers, other government agencies, professional bodies and/or other organisations. I have been advised by the training organisation that I may be contacted and requested to participate in a National Centre for Vocational Education Research (NVCER) survey or a Department-endorsed project or audit or review.

The Education and Training Reform Act 2006 requires The Centre of Excellence to collect and disclose my personal information for a number of purposes including the allocation to me of a Victorian Student Number and updating my personal information on the Victorian Student Register.

For more information in relation to how student information may be used or disclosed please contact The Centre of Excellence's CEO on 03 5222 1818 or info@coe.vic.edu.au

#### 24. Student Declaration

- I declare that all the information supplied in this application form and supporting documentation is true and accurate.
- I am aware that I am required to pay all fess owing in full 30 days before the end of my course.
- I agree to and have signed the Fee Acceptance Form
- I have read The Centre of Excellence Code of Conduct and agree to abide to the Code of Conduct.
- I agree to update my contact details with The Centre of Excellence when they change.
- I understand that The Centre of Excellence policies and procedures are available on The Centre of Excellence website (<u>www.coe.vic.edu.au</u>)
- I acknowledge and agree that any testimonials or photos of me which are produced by The Centre of Excellence
  are property of The Centre of Excellence and may be used for The Centre of Excellence's promotional material.
  This agreement can be withdrawn at any time, in writing to the Director of Campuses.
- I understand that Certificates and Statements of Attainments will be issued at each school holidays. If I complete
  my studies after a certificate run has been issued, I am aware I must wait for the following school holidays. If I
  require my Certificate or Statement of Attainment prior to the certificate run, I am aware that I can pay \$25.00 for
  a Statement of Attainment or \$50.00 for a Certificate of Qualification to be issued.

Student signature**
Date

<sup>\*\*</sup> By inserting your name in the above signature field you authorise that all the above information are true and correct. This will be considered as your signature.



#### 25. Payment Options for Deposit

Cash Cheque made payable to "The Centre of Excellence"

Bank Transfer Credit Card

#### 26. Bank Transfer

Bank Name	Bendigo Bank
Account Name	The Centre of Excellence PTY LTD
BSB No	633 000
Account No	155 479 710
SWIFT CODE	BENDAU3B

#### 27. Check list (mandatory): Please Tick

Completed all relevant sections of the enrolment form

Signed Student declaration of the enrolment form

Attach Certified Copy of passport (all the used, photo and information pages)

Attach certified copies of relevant academic records in your home country, such as high school or college/university certificates

Attach certified copies of relevant academic records in Australia, such as high school or college/university certificates (if relevant)

Attach Certified Copy of English course taken at any other Institute example ELICOS

For students currently in Australia, copy of Overseas Student Health Cover card as well as names and dates of birth of family member(s) if applying for family cover:

Attach certified copies of work references (if relevant)

Attach valid student visa (if you are currently in Australia)

#### N: B: Please attach any supporting documentation.

Application form can be filled and send it via email at admission@coe.vic.edu.au