

# APPLICATION FORM



## STUDENT DETAILS

TITLE (Please tick)

Mr  Mrs  Ms  Miss  Other

FAMILY NAME \_\_\_\_\_

FIRST NAME \_\_\_\_\_

OTHER NAMES \_\_\_\_\_

PREFERRED NAME \_\_\_\_\_

GENDER (Please tick)  Male  Female

DATE OF BIRTH \_\_\_\_ / \_\_\_\_ / \_\_\_\_

NATIONALITY \_\_\_\_\_

COUNTRY OF BIRTH \_\_\_\_\_

CURRENT HOME ADDRESS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ POSTCODE \_\_\_\_\_

HOME TELEPHONE \_\_\_\_\_

MOBILE \_\_\_\_\_

E-MAIL \_\_\_\_\_

PASSPORT NUMBER \_\_\_\_\_

VISA TYPE \_\_\_\_\_

VISA ISSUING OFFICE \_\_\_\_\_

DO YOU REQUIRE THE FOLLOWING WHEN IN AUSTRALIA?  
(Please tick relevant answer)

HOME STAY ACCOMMODATION REQUIRED  Yes  No

AIRPORT TRANSFER REQUIRED  Yes  No

TYPE OF OVERSEAS STUDENT HEALTH COVER REQUIRED  
Compulsory requirement (currently priced at \$380AUD per annum for a single persons cover). Please be advised that this price was correct at time of creating form.

Single  Family

## ENGLISH AND ACADEMIC BACKGROUND

HAVE YOU DONE PREVIOUS STUDY WITH ENGLISH AS THE LANGUAGE OF INSTRUCTION (Please tick)  Yes  No

If yes, for how many years? \_\_\_\_\_  
Please attach relevant documentation proof.

DO YOU WISH TO APPLY FOR RECOGNITION OF PRIOR LEARNING OR CREDIT TRANSFER? (Please tick)  Yes  No

If yes, please complete an RPL / Credit Transfer Application Form and attach required documentation.

What is your IELTS / TOEFL score: \_\_\_\_\_  
Please attach relevant documentation proof.

Do you need to do an English Course  Yes  No

## COURSE DETAILS

Please tick the Hospitality courses you wish to apply for:

- SIT30807 – Certificate III in Hospitality (Commercial Cookery)   
CRICOS Code: 066963C
- SIT40407 – Certificate IV in Hospitality (Commercial Cookery)   
CRICOS Code: 066964B
- SIT50307 – Diploma of Hospitality.....   
CRICOS Code: 066965A
- SIT60307 – Advanced Diploma of Hospitality.....   
CRICOS Code: 066966M
- All of the above courses.....

PROPOSED COURSE START DATE \_\_\_\_\_

If you are continuing onto University – please provide details:

UNIVERSITY APPLIED TO \_\_\_\_\_

COURSE APPLIED TO \_\_\_\_\_

COURSE START DATE \_\_\_\_\_

## STUDENT DECLARATION

PLEASE SIGN DECLARATION

I have read and accept the Terms and Conditions, the Indemnity and Release and Privacy Statement as set out in the course brochure and by signing I authorise AIC Australian International College to invoice me for the course fees stipulated to be paid and I agree that all information is true and correct. I also agree that I am over 18 years of age and can apply for a position with AIC Australian International College:

SIGNED (STUDENT) \_\_\_\_\_

DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_

PLEASE SUBMIT YOUR APPLICATION TO:  
AIC Australian International College  
372 Spencer Street, MELBOURNE VIC 3003  
T. +61 3 9329 1155  
F. +61 3 9329 1511

E. [studentadmin@aic.vic.edu.au](mailto:studentadmin@aic.vic.edu.au) W. [www.aic.vic.edu.au](http://www.aic.vic.edu.au)  
Please ensure all documentation is attached to this application.  
Incomplete applications will not be processed.

## AGENT DETAILS (If applicable)

AGENT'S STAMP

AGENT'S NAME \_\_\_\_\_

AGENT'S ADDRESS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ POSTCODE \_\_\_\_\_

TELEPHONE \_\_\_\_\_

FAX \_\_\_\_\_

E-MAIL \_\_\_\_\_

WHERE IS THE OFFER LETTER TO BE SENT:

STUDENT  AGENT