

Please read this application form carefully and complete ALL sections ensuring that the certified copies of your academic transcripts and English Language assessments are attached.

| Melbourne Campus  |                     |                        | Sydney Campus   |                    |                        |  |
|---|---------------------|------------------------|-----------------|--------------------|------------------------|--|
|   |                     |                        |                 |                    |                        |  |
| 1. PERSONAL DETA  |                     |                        |                 | _                  |                        |  |
| Title: Mr.  | Mrs.                | Ms.                    | Dr.             | Other              |                        |  |
| Family name:<br>(as in passport)  |                     |                        |                 |                    |                        |  |
| Given name(s):  |                     |                        |                 |                    |                        |  |
| (as in passport)  | , .                 |                        |                 |                    |                        |  |
| Date of Birth (dd/mm/   |                     | Gender:                | Male            | Female             | Other or Non-disclosed |  |
| Nationality (as in pass   |                     |                        |                 |                    |                        |  |
| Phone/Mobile (with co   | ountry code):       |                        |                 |                    |                        |  |
| Email Address:  |                     |                        |                 |                    |                        |  |
| Address in Home Cou   | ntrv                |                        |                 |                    |                        |  |
| Address:  | ····· <b>,</b>      |                        |                 |                    |                        |  |
| Suburb / Town:  |                     |                        | Р               | Postcode:          |                        |  |
| Country:  |                     |                        |                 |                    |                        |  |
| Telephone/ Mobile:  |                     |                        | Email:          |                    |                        |  |
|   |                     |                        |                 |                    |                        |  |
| Address in Australia (i   | if known)           |                        |                 |                    |                        |  |
| Address:  |                     |                        |                 |                    |                        |  |
| Suburb / Town:  |                     |                        | P               | Postcode:          |                        |  |
| Country:  |                     |                        |                 |                    |                        |  |
| Telephone/ Mobile:  | Email:              |                        |                 |                    |                        |  |
|   |                     |                        |                 |                    |                        |  |
| Emergency Contact D   | etails              |                        |                 |                    |                        |  |
| Contact Name:   | Phone Number:       |                        |                 |                    |                        |  |
| Mobile Number:  |                     |                        | Relationsh      | nip:               |                        |  |
| Medical Conditions  |                     |                        |                 |                    |                        |  |
|   | disahility or medic | al conditions? (e.g. i | ntellectual hea | aring vision etc.) | Yes No                 |  |
| Do you have a known disability or medical conditions? (e.g., intellectual, hearing, vision, etc.)  Yes  No  If 'Yes' (give details and contact our admin team): |                     |                        |                 |                    |                        |  |
| ii res (give details dir  | a contact our dam   | in teamy.              |                 |                    |                        |  |
| 2. PASSPORT AND   | VISA DETAILS        |                        |                 |                    |                        |  |
| Country of Birth:   |                     |                        |                 |                    |                        |  |
| Citizenship:  |                     |                        |                 |                    |                        |  |
| Passport Number:  |                     |                        | Passport        | Expiry Date:       |                        |  |
| VISA Type:  |                     | Subclass:              |                 | VISA Expi          | ry Date:               |  |
|   |                     |                        |                 |                    |                        |  |
|   |                     |                        |                 |                    |                        |  |



| Do vo  |   |   |   |  |  |            |                                     |                           |  |                                      |  |  |  |
|--|---|---|---|--|--|------------|-------------------------------------|---------------------------|--|--------------------------------------|--|--|--|
| DO yo  | ou hold a valid Austral   | ian visa?   |   |  |  |            |                                     |                           |  |                                      |  |  |  |
|  | Yes No  | If yes, p   | olease spe  | ecify:   |  |            |                                     |                           |  |                                      |  |  |  |
| What   | t type of visa will you b   | e holding   | when you  | commence   | e your st  | udies?     |                                     |                           |  |                                      |  |  |  |
|  | Student   | \   | Working H   | loliday  |  | Touris     | t                                   |                           |  | Other                                |  |  |  |
| Have you applied to become a permanent residence of Austr  |   |   |   |  |  |            | Yes                                 |                           | No   |                                      |  |  |  |
| If 'Ye   | s' date of application  | dd/mm/yy  | /):   |  |  |            |                                     |                           |  |                                      |  |  |  |
| Have you organised Overseas Student Health Cover?  |   |   |   |  |  |            |                                     |                           |  |                                      |  |  |  |
|  | Yes No If ' <b>YES'</b> please give details:  |   |   |  |  |            |                                     |                           |  |                                      |  |  |  |
| As an international student you are required to apply for Overseas Student Health cover to study in Australia. Britts College can arrange this for you. Please tick which cover you require: |   |   |   |  |  |            |                                     |                           |  |                                      |  |  |  |
| ,  | Yes, Single Cover (Sing   | le cover is   | only for th   | he overseas  | s student  | :)         |                                     |                           |  |                                      |  |  |  |
|  | Yes, Couple cover (Co   | uple cover  | is for over   | rseas stude  | nt and o   | ne adul    | t)                                  |                           |  |                                      |  |  |  |
|  | Yes, Family Cover (Fan  | nily cover is   | s for overs   | seas studen  | nt and mo  | ore than   | n one de                            | penden                    | t)   |                                      |  |  |  |
|  |   |   |   |  |  |            |                                     |                           |  |                                      |  |  |  |
|  | ANGUAGE AND CUL   |   |   |  |  |            |                                     |                           |  |                                      |  |  |  |
|  | nich country were you   |   | Austra  |  | Other  | r - Pleas  | e specify                           | y:                        |  |                                      |  |  |  |
| Do yo  | ou speak a language o   | ther than E   | nglish at h   | nome?  |  |            |                                     |                           |  |                                      |  |  |  |
|  |   | - Please sp   | -   |  |  |            |                                     |                           |  |                                      |  |  |  |
| How  | well do you speak Eng   | ;lish?  | Very w  | vell   | Wel  |            |                                     | Not                       | well   | Not at all                           |  |  |  |
| Are y  | ou of Aboriginal or To  | rres Strait   | islander o  | rigin?   | No   |            | Yes - Ple                           | ease spe                  | cify:  |                                      |  |  |  |
| 4 D  | DEVIOUS ACADEMI   | cc .  |   |  |  |            |                                     |                           |  |                                      |  |  |  |
| 4. P   | <b>REVIOUS ACADEMIC</b>   | ည   |   |  |  |            |                                     |                           |  |                                      |  |  |  |
| 11   | Have you done your  | schooling   | ) V   | /oc  | No   |            |                                     |                           |  |                                      |  |  |  |
| 4.1  | Have you done your  |   | ? Y   | Yes  | No   |            |                                     |                           |  |                                      |  |  |  |
| 4.1  | Highest Qualification   |   | ? γ   | ⁄es  | No   |            |                                     | Comple                    | oted Ves   |                                      |  |  |  |
|  | Highest Qualification Name of Institute:  | n:  |   |  |  | Va         |                                     |                           | eted Yea   | r:                                   |  |  |  |
| 4.1  | Highest Qualification Name of Institute: Are you currently er   | n:<br>nrolled with  | n any educ  | cation provi   | ider?  | Ye         |                                     | N                         | lo   |                                      |  |  |  |
|  | Highest Qualification Name of Institute: Are you currently er   | n:<br>nrolled with  | n any educ  | cation provi   | ider?  |            |                                     | N                         | lo   | r:<br>o to question 4.3, if No pleas |  |  |  |
|  | Highest Qualification Name of Institute: Are you currently er (if 'Yes' please read   | n:<br>nrolled with  | n any educ  | cation provi   | ider?  |            |                                     | N                         | lo   |                                      |  |  |  |
|  | Highest Qualification Name of Institute: Are you currently er (if 'Yes' please read   | n:<br>nrolled with  | n any educ<br>ation care  | cation provi<br>fully by visi  | ider?  |            |                                     | N                         | lo   |                                      |  |  |  |
| 4.2  | Highest Qualification Name of Institute: Are you currently er (if 'Yes' please read go to question 4.4).  | n:<br>nrolled with<br>the informa<br>th Britts Co                                   | n any educ<br>ation care  | cation provi<br>fully by visi  | ider?  |            | tscollege                           | N                         | lo   |                                      |  |  |  |
| 4.2  | Highest Qualification Name of Institute: Are you currently er (if 'Yes' please read go to question 4.4).  Have you studied wi   | n:<br>nrolled with<br>the informa<br>th Britts Co<br>er:                            | n any educ<br>ation care  | cation provi<br>fully by visi  | ider?  |            | tscollege                           | e.edu.au                  | lo   |                                      |  |  |  |
| 4.2  | Highest Qualification Name of Institute: Are you currently er (if 'Yes' please read go to question 4.4).  Have you studied wi Yes - ID Number English Language Pr Please provide certif   | nrolled with the informa th Britts Co er: oficiency fied copies                     | n any educ<br>ation care<br>ollege prev                             | cation provi<br>efully by visi<br>viously?<br>atest 2-year                                 | ider?<br>iting <u>httr</u>                                     | os://brit  | tscolleg                            | No<br>S, TOEFI            | lo<br>i/ and go<br>_ or PEAF                     |                                      |  |  |  |
| 4.2  | Highest Qualification Name of Institute: Are you currently er (if 'Yes' please read go to question 4.4).  Have you studied with yes - ID Number English Language Prese provide certification of the please note that only IELTS/ TOEFL/ PEARS | n: arolled with the information the Britts Coer: oficiency fied copies y results ac | n any educ<br>ation care<br>ollege prev<br>of your la<br>chieved wi | cation provi<br>efully by visi<br>viously?<br>atest 2-year<br>eithin two ye                | ider?<br>iting <u>httr</u><br>academ                           | ic resulte | tscollego<br>ts & IELT<br>date will | No<br>S, TOEFI<br>be cons | lo<br><u>I/</u> and go<br>_ or PEAF<br>idered. I | to question 4.3, if No pleas         |  |  |  |
| 4.2  | Highest Qualification Name of Institute: Are you currently er (if 'Yes' please read go to question 4.4).  Have you studied wi Yes - ID Number English Language Pr Please provide certif Please note that onl                                  | th Britts Coer: oficiency fied copies y results ac SON exam,                        | of your la<br>chieved wi<br>please inc                              | cation provi<br>efully by visi<br>viously?<br>atest 2-year<br>ithin two ye<br>dicate below | ider?<br>iting <u>http</u><br>academ<br>ears of th<br>w when v | ic resulte | ts & IELT<br>date will<br>be seati  | No<br>S, TOEFI<br>be cons | or PEAFidered. Ine test.                         | to question 4.3, if No pleas         |  |  |  |



| 5. EMPLOYME  | NT DETAILS                       |                          |                |                                 |                                  |  |  |
|--|----------------------------------|--------------------------|----------------|---------------------------------|----------------------------------|--|--|
| Of the following   | categories, which BES            | T describes your curr    | ent employme   | ent status?                     |                                  |  |  |
| Full-time e  | mployee                          | Part-time employee       |                | Self-employed                   | Employer                         |  |  |
| Employed i   | n a family business              | Unemployed -             | seeking work   | Not employed - n                | ot seeking employment            |  |  |
|  |                                  |                          |                |                                 |                                  |  |  |
| 6. REASON FO   | R STUDY                          |                          |                |                                 |                                  |  |  |
| Of the following   | categories, which BES            | T describes your mair    | reason for u   | ndertaking this course?         |                                  |  |  |
| To get a job   |                                  |                          | To de          | To develop my existing business |                                  |  |  |
| To start m   | To start my own business         |                          |                | y for a different career        |                                  |  |  |
| To get a be  | To get a better job or promotion |                          |                | s a requirement of my job       |                                  |  |  |
| To get into  | another course of stu            | udy                      | For p          | ersonal interest or self-de     | evelopment                       |  |  |
| Other reas   | ons                              |                          |                |                                 |                                  |  |  |
|  |                                  |                          |                |                                 |                                  |  |  |
| 7. COURSES IN  |                                  |                          |                |                                 |                                  |  |  |
| Please select fro  | m the drop down list             | below                    |                |                                 |                                  |  |  |
| ELICOS:  | General English                  | n Wee                    | KS             |                                 |                                  |  |  |
| Main Course 1:   |                                  |                          |                |                                 |                                  |  |  |
| Main Course 2:   |                                  |                          |                |                                 |                                  |  |  |
| Main Course 3:   |                                  |                          |                |                                 |                                  |  |  |
| Main Course 4:   |                                  |                          |                |                                 |                                  |  |  |
| Main Course 5:   |                                  |                          |                |                                 |                                  |  |  |
|  |                                  |                          | Note: The f    | ollowing courses are availab    | ole only in Sydney: C3 Carpentry |  |  |
| Flexible Intake D  | ates – Write your pref           | erence: Month            |                | Year                            |                                  |  |  |
|  |                                  |                          |                |                                 |                                  |  |  |
| 8. TRANSFERR   | ING STUDENT INFO                 | RMATION: (IF APPL        | ICABLE)        |                                 |                                  |  |  |
| Are you transfer   | ring from another edu            | cation provider in Au    | stralia?       | Yes No                          |                                  |  |  |
| If 'Yes' then have   | you completed the f              | irst 6 months of your    | principal cour | se? Yes                         | No                               |  |  |
| Name of Institut   | e:                               |                          |                |                                 |                                  |  |  |
| If you currently e   | enrolled in another ins          | titute in Australia, ple | ease provide r | elease letter.                  |                                  |  |  |
|  |                                  |                          |                |                                 |                                  |  |  |
| 9. COURSE CR   | EDIT                             |                          |                |                                 |                                  |  |  |
| Do you intend to apply for Course Credit?  |                                  |                          |                |                                 |                                  |  |  |
| Yes (If 'Yes' download and complete Nortwest course credit form from <a href="https://brittscollege.edu.au/">https://brittscollege.edu.au/</a> )  No   |                                  |                          |                |                                 |                                  |  |  |
|  |                                  |                          |                |                                 |                                  |  |  |
|  | TUDENT IDENTIFIER                |                          |                |                                 |                                  |  |  |
| -  | nique Student Identifi           | er (USI) number?         | Yes            | No                              |                                  |  |  |
| If 'Yes' please pr   | ovide your USI no.               |                          |                |                                 |                                  |  |  |
| Britts College can create an USI account on your behalf. Please acknowledge if you would like us to create one for you.  |                                  |                          |                |                                 |                                  |  |  |
| Agree  | Disagree                         |                          |                |                                 |                                  |  |  |
| <b>Please note:</b> It is mandatory that all International Students must have an USI number. This form is available on the USI website. Please use the following link: <a href="https://www.usi.gov.au/">https://www.usi.gov.au/</a> |                                  |                          |                |                                 |                                  |  |  |



| 11. EDUCATION AGENT DETAILS (If applicable)  |   |  |  |  |  |
|--|---|--|--|--|--|
| If you were referred by  | an Education Agent, please provide details below.       |  |  |  |  |
| Name of the agent:   |   |  |  |  |  |
| Name of the agency:  |   |  |  |  |  |
| Address:   |   |  |  |  |  |
| I authorise the agent se   | lected to act on my behalf:   Authorise education agent |  |  |  |  |
| Agent declaration  |   |  |  |  |  |
| I am satisfied that the applicant is a genuine student and has completed the requirements of being a genuine student as required by Department of Home Affairs (DHA). I recommend them for admission to Britts College. I am satisfied that the applicant has access to sufficient funds to cover tuition, travel, living and OSHC costs for themselves and any dependants. I confirm that the supporting documentation provided with this application are the true copy of the originals which are/were sighted by me and can confirm their authenticity and genuineness. |   |  |  |  |  |
| Agent Signature:   | Date:   |  |  |  |  |

### 12. PRIVACY NOTICE

Under the Data Provision Requirements 2012, Workplace Health and Safety Services Pty Ltd is required to collect personal information about you and to disclose that personal information to the National Centre for Vocational Education Research Ltd (NCVER). Your personal information (including the personal information contained on this enrolment form and your training activity data) may be used or disclosed by Britts College for statistical, regulatory and research purposes. Britts College may disclose your personal information for these purposes to third parties. This practice is also required by the ESOS Act and the ESOS National Code 2018. including:

- School: if you are a secondary student undertaking VET, including a school-based apprenticeship or traineeship
- Employer: if you are enrolled in training paid by your employer
- Commonwealth and State or Territory government departments and authorized agencies
- NCVER
- Researchers

Personal information disclosed to NCVER may be used or disclosed for the following purposes:

- Issuing a VET Statement of Attainment or VET Qualification, and populating Authenticated VET Transcripts
- Facilitating statistics and research relating to education, including surveys
- Understanding how the VET market operates, for policy, workforce planning and consumer information, and
- Administering VET, including program administration, regulation, monitoring and evaluation

You may receive an NCVER student survey which may be administered by an NCVER employee, agent or third-party contractor. You may opt out of the survey at the time of being contacted.

NCVER will collect, hold, use and disclose your personal information in accordance with the Privacy Act 1988 (Cth), the VET data policy and all NCVER policies and protocols (including those published on NCVER's website at <a href="https://www.ncver.edu.au">www.ncver.edu.au</a>).

#### 13. STUDENT DECLARATION

- 1. I declare that the information contained in this application and the supporting documentation is true and correct. I understand giving false or misleading information is a serious offence under state and/or federal law in Australia.
- 2. I declare that I am a Genuine Temporary Entrant (GTE) and a Genuine Student and that I have read and understood the conditions in relation to these requirements as defined on the following website: <a href="https://immi.homeaffairs.gov.au/visas/getting-a-visa/visa-listing/student-500/genuinetemporary-entrant">https://immi.homeaffairs.gov.au/visas/getting-a-visa/visa-listing/student-500/genuinetemporary-entrant</a>.
- 3. I understand that if Britts College forms the opinion that I am not a Genuine Temporary Entrant, they may refuse to assess my application, withdraw an offer or cancel my confirmation of enrolment.
- 4. I declare that I have read and understand the information related to Britts College's admissions requirement, tuition fees, course information and refund policy on <a href="https://www.brittscollege.com.au">www.brittscollege.com.au</a>



| 5.  | I agree to advise Britts College immediately if there are any changes to the information I have provided in this application.   |                     |      |  |  |  |
|-----|---|---------------------|------|--|--|--|
| 6.  | I understand that Britts College have the right to vary or reverse any assessment made on the basis of incorrect, incomplete, false or misleading information which I have provided.      |                     |      |  |  |  |
| 7.  | I understand that by completing this application, I am giving written consent to Britts College verify the information supplied by me in this application.                                |                     |      |  |  |  |
| 8.  | I declare that I have access to the funds required to study at Britts College for the length of my course including course/tuition fees and living expenses for myself and my dependents. |                     |      |  |  |  |
| 9.  | I agree to allow Britts College to check my visa entitlements via DHA Visa Entitlements Verification Online (VEVO) System.  |                     |      |  |  |  |
| 10. | . I have read and understood the above conditions and accept them in full.  |                     |      |  |  |  |
|     |   |                     |      |  |  |  |
| Арр | licant Name   | Applicant Signature | Date |  |  |  |