



INTERNATIONAL STUDENT APPLICATION FORM

Agent Name/ID/Stamp _____

Date of Application _____

Applicant is (Please Tick **ONE** Box) ☐ Offshore ☐ Onshore

USI INFORMATION

Enter your Unique Student Identifier (USI) (if you already have one)

Unique Student Identifier (USI)

If you do not yet have a USI and want Salisbury College Australia to apply for a USI on your behalf, you must write your name, including any middle names, exactly as written in the identity document you choose to use for this purpose (SCA staff will help you in orientation day).

Alternatively, you can apply for a USI through <https://www.usi.gov.au/students/create-your-usi>

Create a USI on Behalf of a Student

I [Full Name] _____ authorise

Salisbury College Australia to apply pursuant to sub-section 9(2) of the Student Identifiers Act 2014, for a USI on my behalf.

☐ I have read and I consent to the collection, use and disclosure of my personal information pursuant to the information detailed at <https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf>.

☐ I declare that the information that I have provided to the best of my knowledge is true and correct.

COURSE PREFERENCES

English Courses

What shift would you prefer? (Please tick one option)

☐ Morning ☐ Evening

Course Code	CRICOS Course Code	Course Name	Tuition Weeks	Campus	Preferred Date/ Intake Date
Non AQF Award	094154D	General English	60 weeks	Burwood	
Non AQF Award	095379A	Academic English	40 weeks	Burwood	
Non AQF Award	095380G	IELTS Exam Preparation	30 weeks	Burwood	
Non AQF Award	095378B	PTE Academic Exam Preparation	12 weeks	Burwood	

***ELICOS Intakes**, are every Monday, each week (excluding 3 weeks of Christmas, New Year and any other public holidays).



Vocational Education Course Preferences

Course Code	CRICOS Course Code	Course Name	Total Course Duration	Campus	Preferred Date/ Intake Date
BSB40120	108155F	Certificate IV in Business	52 weeks	Burwood	
BSB50120	108157D	Diploma of Business	52 weeks	Burwood	
BSB60120	108154G	Advanced Diploma of Business	52 weeks	Burwood	
BSB40820	108156E	Certificate IV in Marketing and Communication	52 weeks	Burwood	
BSB50620	108158C	Diploma of Marketing and Communication	52 weeks	Burwood	
BSB60520	106775E	Advanced Diploma of Marketing and Communication	78 weeks	Burwood	
BSB50420	104311J	Diploma of Leadership and Management	78 weeks	Burwood	
BSB60420	108152J	Advanced Diploma of Leadership and Management	78 weeks	Burwood	
SIT40521	109524M	Certificate IV in Kitchen Management	78 weeks	Burwood	
SIT50416	0100892	Diploma of Hospitality Management	78 weeks	Burwood	
SIT60316	106776D	Advanced Diploma of Hospitality Management	78 weeks	Burwood	
BSB80120	108153H	Graduate Diploma of Management (Learning)	52 weeks	Burwood	
ICT60220	108155F	Advanced Diploma of Information Technology (Cyber Security)	104 weeks	Burwood	

* VET Intakes, please visit our website www.sc.edu.au





INTERNATIONAL STUDENT APPLICATION FORM

PERSONAL DETAILS

1. Full name (same on your passport)

Family name (surname) _____
Given names _____

2. Date of birth (ddmmyyyy) _____

3. Gender (Tick ONE box only)

☐

Male

☐

Female

☐

Other

4. Contact details

Home Phone _____ Work Phone _____

Mobile _____ Email Address _____

5. Home Country Contact Details

House number/Flat/Unit _____ Street _____

Suburb/Town _____ State _____ Postcode _____

☐

Please tick if your postal address is the same as your current address.

6. Australian Contact Details

House number/Flat/Unit _____ Street _____

Suburb/Town _____ State _____ Postcode _____

7. Passport and Visa Details

Passport Number _____ Expiry Date _____ Visa type _____

Country of Citizenship _____ Nationality _____

Country of Birth _____

Do you speak a language other than English? If Yes; what is it? _____

8. Are you of Aboriginal or Torres Strait Islander origin?

☐

No

☐

Yes, Aboriginal

☐

Yes, Torres Strait Islander

DISABILITY

9. Do you consider yourself to have a disability, impairment or long-term condition?

☐

NO

☐

YES

10. If you answered yes, please tick the ones that apply to you

☐

Hearing/deaf

☐

Physical

☐

Intellectual

☐

Learning

☐

Mental illness

☐

Acquired brain impairment

☐

Vision

☐

Medical condition

☐

Other, please specify



INTERNATIONAL STUDENT APPLICATION FORM

NEXT OF KIN

11. Relationship _____

12. Full name

Family name(surname) _____

Given names _____

13. Address

Country _____ House number / Flat / Unit _____ Street _____

Suburb / Town _____ State _____ Postcode _____

14. Contact details

Mobile _____ Email _____

PERSON TO CONTACT IN AN EMERGENCY

15. Relationship _____

16. Full name

Family name(surname) _____

Given names _____

17. Address

Country _____ House number / Flat / Unit _____ Street _____

Suburb / Town _____ State _____ Postcode _____

18. Contact details

Mobile _____ Email _____

SCHOOLING

19. What year did you complete school? _____

Are you still attending secondary school?

☐

YES

☐

NO

PREVIOUS QUALIFICATIONS ACHIEVED

20. List all the qualifications you have SUCCESSFULLY completed. (You must attach verified copies of all qualifications)

21. English exams completed and score _____

(You must attach verified copies of English language results, for example IELTS)

22. Have you enrolled in the same or a similar course elsewhere?

☐

YES

☐

NO

- a. (If you have you may be eligible for a credit transfer or Recognition of Prior Learning (RPL) – contact the Senior Trainer for further information. You must attach verified copies of documents to support a credit transfer or RPL application)
- b. No Fee applies for Credit Transfers. However, a non-refundable fee applies to all applications for RPL.



INTERNATIONAL STUDENT APPLICATION FORM

EMPLOYMENT

23. Of the following categories, which BEST describes your current employment status?

(Tick ONE box only)

<input type="checkbox"/> Full-time employee	<input type="checkbox"/> Employed – unpaid worker in a family business
<input type="checkbox"/> Part-time employee	<input type="checkbox"/> Unemployed – seeking full-time work
<input type="checkbox"/> Self employed – not employing others	<input type="checkbox"/> Unemployed – seeking part-time work
<input type="checkbox"/> Employer	<input type="checkbox"/> Not employed – not seeking employment

24. Have you been employed in the area covered by the course applied for?

<input type="checkbox"/> YES	<input type="checkbox"/> NO
------------------------------	-----------------------------

(If you have you may be eligible for Recognition of Prior Learning – contact the Senior Trainer for further information You must attach verified copies of documents to support an RPL application)

STUDY REASON

25. Tell us the reason you want to take our course ☐ Career ☐ Academic ☐ Personal

26. Where did you hear about us? _____

ACCOMMODATION AND AIRPORT TRANSFERS

27. Do you require us to arrange accommodation for you? ☐ YES ☐ NO

28. Do you require Airport Transfer? ☐ YES ☐ NO

If yes, Arrival Date _____ Time _____ Flight Number _____

OVERSEAS STUDENT HEALTH COVER (OSHC)

29. If you require Overseas Student Health Cover, please indicate your preference: ☐ Single ☐ Dual family ☐ Multi family ☐ I will arrange my own OSHC myself/with my agent

STUDENT DECLARATION

- ☐ I declare that the information that I have provided to the best of my knowledge is true and correct.
- ☐ I understand that Salisbury College Australia is required to submit data sourced from this enrolment form to the National Centre for Vocational Education Research (NCVER) as a regulatory reporting requirement.
- ☐ The information contained on my enrolment form may be used by Salisbury College Australia or the following third parties for administrative, regulatory and/or research purposes:
- School - if I am a secondary student undertaking VET, including a school based apprenticeship or traineeship.
 - Employer - if I am enrolled in training paid by my employer.
 - Government departments and authorised agencies.
 - Researchers.

Full Student Name _____

Student Signature _____ Date _____

30. Please tick the following box if you wish to pay more than half of your tuition fees before your course commences.

<input type="checkbox"/> YES	<input type="checkbox"/> NO
------------------------------	-----------------------------