

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	SCA
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	
SIT50422	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



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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 PhoneWork	Phone
MobileEmail Addr	ess
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 NumberExpiry 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 St	rait Islander
DISABIL	ITY
9. Do you consider yourself to have a disability, impairment	
NO YES	or long-term condition:
10. If you answered yes, please tick the ones that apply to y	PH SCA
Hearing/deaf	Physical
Intellectual	Learning
Mental illness	Acquired brain impairment
Vision	Medical condition
Other, please specify	
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INTERNATIONAL STUDENT Δ

	NEXT OF KIN	
11. Relationship		
12. Full name		
Family name(surname)_		
Given names		
	House number / Flat / Unit	Street
		Postcode
14. Contact details		
Mobile	Email	
	PERSON TO CONTACT IN A	N EMERGENCY
15. Relationship		
16. Full name		
17. Address		Street
-	State	Postcode
18. Contact details		
Mobile	Email	
	SCHOOLING	
19. What year did you co Are you still attending	secondary school?	NO
	PREVIOUS QUALIFICATION	IS ACHIEVED
20. List all the qualificat	ions you have SUCCESSFULLY completed	• (You must attach verified copies of allqualification
	,	
	eted and score	- 100 - 132
(You must attach ver	ified copies of English language results, for example	IELTS)
22. Have you enrolled in t	he same or a similar course elsewhere?	YES NO

(If you have you may be eligible for a credit transfer or Recognition of Prior Learning (RPL) - contact the Senior Trainer for а. further information. You must attach verified copies of documents to support a credit transfer or RPL application)

No Fee applies for Credit Transfers. However, a non-refundable fee applies to all applications for RPL. b.

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INTERNATIONAL STUDENT APPLICATION FORM

EMPLOYMENT

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

(Tick **ONE** box only)

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Full-time employee	Employed – unpaid worker in a family business
Part-time employee	Unemployed – seeking full-time work
Self employed – not employing others	Unemployed – seeking part-time work
Employer	Not employed – not seeking employment
24. Have you been employed in the area covered by the c (If you have you may be eligible for Recognition of Prior Learning – cor further information You must attach verified copies of documents to supp	ntact the Senior Trainer for
STUDY REA	SON
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 HE	ALTH 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 DE	CLARATION
 I declare that the information that I have provided I understand that Salisbury College Australia is requirement to the National Centre for Vocational Education requirement. The information contained on my enrolment form a following third parties for administrative, regulator School - if I am a secondary student undertaking VE Employer - if I am enrolled in training paid by m Government departments and authorised agent Researchers. 	uired to submit data sourced from this enrolment on Research (NCVER) as a regulatory reporting may be used by Salisbury College Australia or the ry and/or research purposes: ET, including a school based apprenticeship or traineeship. by employer.
Full Student Name	
Student Signature	Date
 30. Please tick the following box if you wish to pay more th commences. YES NO 	nan half of your tuition fees before your course

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