

International Student Enrolment Application



PERSONAL DETAILS

Title:	Mr	Mrs	Miss	Ms	Other (specify):	Family Name:		
Given name:					Middle name:			
Date of Birth:	Marital Status:			Gender:	Male	Female	Other	
Country of Birth:	Passport Number:			Passport Expiry Date:				
Do you have a Visa to study in Australia?	Yes	No	If yes, state what type of Visa		If No, where will you be making your visa application?		Australia	Offshore:
Do you have family members in Australia?	Yes	No	If Yes, please list:					
Do you have Overseas Student Health Cover?	Yes	No	If yes, who is your provider?		Membership Number:	Please attach a copy of your current Insurance cover		
If No, would you like AIWT to organise it?	Yes	No	Do you need cover for:		Single	Couple	Family	
Do you require accommodation services?	Yes	No	If yes, what is your weekly budget?					

CONTACT DETAILS

OVERSEAS PERMANENT ADDRESS:

Address:	Country:
	Postcode:
Phone (home):	Mobile:

ADDRESS IN AUSTRALIA:

Street Address:	Suburb:	State:	Postcode:
Email Address:	Country:		
Phone (home):	Mobile:		

EMERGENCY CONTACT IN AUSTRALIA/OVERSEAS:

Family Name:	Given Name(s):	
Phone (home):	Mobile:	Relationship of this person to you?

EQUITY AND DISABILITY

Do you consider yourself to have a disability, impairment or long-term condition? Yes No, go to next section

If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list:

Hearing/deaf	Physical	Intellectual	Mental illness	Acquired brain impairment	Medical condition	Vision
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Other

MARKETING

How did you find out about AIWT?

Education Agent	Exhibition/Seminar	Social Media	Friend/Relative:
Magazine/Newspaper	AIWT website	Other (specify):	

CREDIT TRANSFER

I have studied a similar course before and would like to apply for a Credit Transfer (Please provide your Transcript and/or Statement of Attainment)

COURSE ENROLMENT *(please tick your choice)*

Start date:

SCHOOL OF EDUCATION AND COMMUNITY SERVICES

CHC33021 Certificate III in Individual Support (Ageing and Disability)
CRICOS CODE: 114935E

CHC30121 Certificate III in Early Childhood Education and Care
CRICOS CODE: 107505H

CHC50121 Diploma of Early Childhood Education and Care
CRICOS CODE: 107506G

CHC52021 Diploma of Community Services
CRICOS CODE: 114162A

CHC62015 Advanced Diploma of Community Sector Management
CRICOS CODE: 091826D

SCHOOL OF BUSINESS

BSB50420 Diploma of Leadership and Management
CRICOS CODE: 104163E

BSB60420 Advanced Diploma of Leadership and Management
CRICOS CODE: 104892E

SCHOOL OF REAL ESTATE

CPP41419 Certificate IV in Real Estate Practice
CRICOS CODE: 0101748

CPP51122 Diploma of Property (Agency Management)
CRICOS CODE: 110341H

SCHOOL OF LANGUAGES

PSP50922 Diploma of Interpreting
CRICOS CODE: 114897F

PSP60822 Advanced Diploma of Translating (English – Chinese)
CRICOS CODE: 113818G

SCHOOL OF WORK HEALTH AND SAFETY

BSB41419 Certificate IV in Work Health and Safety
CRICOS CODE: 0101208

BSB51319 Diploma of Work Health and Safety
CRICOS CODE: 0101205

BSB60619 Advanced Diploma of Work Health and Safety
CRICOS CODE: 0101514

ENGLISH LEVEL

Complete only relevant fields and attach evidence (certificates/results) for any courses/tests you have undertaken.

Is English your first language?	Yes		No		Was English the language of instruction during your schooling/studies?		Yes		No	
Have you undertaken an English course in Australia?			Yes	No	If yes, please give details:					
Have you undertaken a formal English test?			Yes	No	IELTS score:	Pearson (PTE) score:	TOEFL score:	Other English test:		

DECLARATION

- I declare that all information I have provided in this form is accurate and I do understand that if I would supply incorrect information, AIWT reserves the right to cancel the enrolment if any information is found to be incorrect, false or misleading.
- I have read and fully understand the AIWT Refund Policy www.aiwt.edu.au/InternationalFees,ChargesandRefundPolicy
- I understand that if I am not able to pay my tuition fees, AIWT will issue a Notice of Intention to Cancel (NOITC). Non-payment of fees can result in cancelling the enrolment which will affect my student visa.
- I am aware that I must abide by my visa conditions and that my student visa may be cancelled if I breach the conditions. For more information, please go to www.homeaffairs.gov.au/Trav/Stud/More/Student-Visa-Living-Costs-and-Evidence-of-Funds
- I consent that my personal information may be made available to Australian Commonwealth and State agencies including the Department of Home Affairs pursuant to obligations under the ESOS Act and the National Code.
- I consent that AIWT may provide information to the Department of Home Affairs with any information about my application, enrolment or study status.
- I understand and agree that AIWT may disclose information in relation to my enrolment status, visa status, including any possible breach of visa conditions along with copies of my course progress and results to my parents or agent.

Name: _____ Date: _____ Signature: _____

Guardian Name: *(For applicants below 18 years old)* _____ Date: _____ Guardian Signature: _____

APPLICATION FEE PAYMENT AUD\$250 *(Non-refundable)*

PAYMENT BY BANK TRANSFER

Bank: Westpac **Account Name:** AIWT Pty Ltd **Reference:** *(List your Full Name)*
BSB: 036 082 **Account Number:** 474 959 **SWIFT:** WPACAU2S

AIWT does not collect more than 50% of the total tuition fee unless the student or their sponsor informs AIWT in writing to choose to pay more than 50%. Prepaid fees are protected through the Tuition Protection Service (TPS). For further information about the Tuition Protection Service (TPS), please visit: <https://tps.gov.au/StaticContent/Get/StudentInformation>

CHECKLIST

Please attach the following documents with your application form:

Passport Bio Page	Course Credit Transfer Form
Current Student Visa <i>(if applicable)</i>	Evidence of English Language Testing
GTE Evidence	Financial Evidence <i>(not for Level 1 countries)</i>
Overseas Student Health Cover	Signed Terms & Conditions Form
CV or Resume	
Qualifications	

Applications will not be processed unless these documents are provided. Please see Document Checklist tool on www.homeaffairs.gov.au for country specific details.

AGENT REPRESENTATIVE STAMP

AIWT OFFICE USE ONLY *(Do Not Complete)*

Date Approved: _____