

F07 – International Student Application Form



Application Guidelines:

Applicants are required to complete this form in its entirety. Incomplete applications may result in being refused from class.

Unique Student Identifier (USI): Students studying nationally recognised training in Australia are required to provide a USI number. Please record your name exactly as you registered it with the USI office, including any middle names. If you do not have a USI number, and have been granted a student visa please visit the USI [website](#) to apply before completing this application. International Students who have not been granted a visa can apply for a USI using their passport after the student visa process is complete.

Program Selection											
Package											
Preferred Start (<i>Term and Year</i>)	<input type="checkbox"/> February	<input type="checkbox"/> April	<input type="checkbox"/> July	<input type="checkbox"/> October	Year						
Please specify below if you hold qualifications in the package you are applying for and would like to enter into the package at a certain program:											
	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> No	<input type="checkbox"/> Yes, select the point of entry below								
Qualification											
Location	<input type="checkbox"/> Brisbane					<input type="checkbox"/> Sydney					

Personal Information (as shown on your passport)											
USI											
Given Name(s)								Family Name(s)			
Middle Name(s)											
Title	Gender				Date of Birth						
Mobile Phone	Home Phone				Work Phone						
Email	Alternate Email										
Preferred Method of Contact				<input type="checkbox"/> Home	<input type="checkbox"/> Mobile	<input type="checkbox"/> Work	<input type="checkbox"/> Email				
Emergency Contact Name											
Contact Phone				Relationship to Student							

Language and Cultural Diversity											
Are you of Aboriginal or Torres Strait Islander origin? Please specify below											
<input type="checkbox"/> Aboriginal	<input type="checkbox"/> Torres Strait Islander	<input type="checkbox"/> Both	<input type="checkbox"/> None								
Country of Birth						City of Birth					

• Citizenship Details <i>Please attach a copy of your passport</i>											
Passport No								Issue Date		Expiry Date	
Nationality								Country of Passport			
Are you currently residing in Australia?				<input type="checkbox"/> No	<input type="checkbox"/> Yes, please specify visa details below						
Visa Category				Issue Date		Expiry Date					

Residential Address											
Building Name						Flat/Unit					
Street Address						Suburb					
Suburb				State		Post Code					
Country											

Postal Address						Same as Above <input type="checkbox"/>					
PO Box or LMB						Suburb					

State		Post Code		Country	
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English Language Proficiency

What language do you speak at home?			If you said English, is it your first language?		
<input type="checkbox"/> Yes	<input type="checkbox"/> No, which English Language Test have you taken?		<input type="checkbox"/> IELTS	<input type="checkbox"/> TOEFL	<input type="checkbox"/> Other
Date of Test		Overall Score	<ul style="list-style-type: none"> Attach a copy of your results 		

Health

Do you consider yourself to have a disability, impairment or long-term condition?		<input type="checkbox"/> No	<input type="checkbox"/> Yes
If you indicated yes, please specify		<input type="checkbox"/> Hearing/Deaf	<input type="checkbox"/> Physical
<input type="checkbox"/> Intellectual	<input type="checkbox"/> Learning	<input type="checkbox"/> Acquired Brain Impairment	
<input type="checkbox"/> Vision	<input type="checkbox"/> Mental Illness	<input type="checkbox"/> Medical Condition	<input type="checkbox"/> Other
If you have checked one or more of the boxes above, do you require additional support?			<input type="checkbox"/> No <input type="checkbox"/> Yes
<i>If you selected yes, a staff member will contact you to discuss your support requirements.</i>			

Secondary Education

What is the highest school level you have completed?		<input type="checkbox"/> Did not go to school	<input type="checkbox"/> Year 8 or below
<input type="checkbox"/> Year 9 or equivalent	<input type="checkbox"/> Year 10 or equivalent	<input type="checkbox"/> Year 11 or equivalent	<input type="checkbox"/> Year 12 or equivalent
Are you currently attending high school?	<input type="checkbox"/> No	<input type="checkbox"/> Yes, specify year	

Prior Education

Do you have any other prior education?		<input type="checkbox"/> No	<input type="checkbox"/> Yes, please indicate below
<input type="checkbox"/> Bachelor Degree or Higher Degree		<input type="checkbox"/> Advanced Diploma (or Associate Degree)	
<input type="checkbox"/> Diploma or (Associate Diploma)		<input type="checkbox"/> Certificate IV (or Advanced Certificate/Technician)	
<input type="checkbox"/> Certificate III (or Trade Certificate)		<input type="checkbox"/> Certificate II	<input type="checkbox"/> Certificate I
<input type="checkbox"/> Other education (including certificates or overseas qualifications not listed above)			
<ul style="list-style-type: none"> If you selected yes, please attach copies of any results that may be related to your application. Records must be an original or certified copy from the issuing organisation or a USI Academic Transcript. 			

Employment

What is your current employment status?		<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time
<input type="checkbox"/> Self-employed - not employing others		<input type="checkbox"/> Self-employed - employing others	
<input type="checkbox"/> Employed, unpaid worker in a family business		<input type="checkbox"/> Un-employed seeking full-time work	
<input type="checkbox"/> Un-employed seeking part-time work		<input type="checkbox"/> Not employed – not seeking employment	
Does your current/recent employment relate to the program you are applying for?			<input type="checkbox"/> No <input type="checkbox"/> Yes
<ul style="list-style-type: none"> If you selected yes, please attach a copy of your most recent resume and/or related role description. 			

Study Reason

Of the following categories, select the one which best describes the main reason you are undertaking study?	
<input type="checkbox"/> To get a job	<input type="checkbox"/> To develop my existing business
<input type="checkbox"/> To start my own business	<input type="checkbox"/> To try for a different career
<input type="checkbox"/> To get a better job or promotion	<input type="checkbox"/> It was a requirement of my job
<input type="checkbox"/> I wanted extra skills for my job	<input type="checkbox"/> To get into another course of study
<input type="checkbox"/> For personal interest or self-development	<input type="checkbox"/> Other reasons

Overseas Student Health Cover (OSHC)				
Do you have current OSHC membership?			<input type="checkbox"/> No	<input type="checkbox"/> Yes (specify details below)
Provider Name			Type of OSHC	
Membership No		Duration		Expiry Date

Privacy Statement and Student Declaration

ASMI is collecting the information on this form in accordance with the Privacy Act 1988 and the Data Provision Requirements 2012 for administrative and academic purposes. Your information will not be disclosed to any other party unless authorised or required by law.

Under the Data Provision Requirements 2012, Australian Skills Management Institute (ASMI) 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 ASMI for statistical, regulatory and research purposes. ASMI may disclose your personal information for these purposes to third parties, 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 authorised agencies;
- NCVER;
- Organisations conducting student surveys; and
- Researchers.

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

- Issuing statements of attainment or 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 programme 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](#)).

For further information, please refer to the Privacy Policy and Procedure located on our [website](#).

- I declare that the information provided in this form is to the best of my knowledge true and correct
- I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Statement
- I understand that if I do not provide all the information required I may not be issued a letter of offer
- I give authorisation for ASMI to access and verify my USI and understand that if I do not provide my USI, I will not be issued with a nationally recognised VET qualification or statement of attainment when I complete my course
- I give authorisation for ASMI to contact my emergency contact if required
- I have been directed to, read and understand the information on ASMI's website pertaining to my rights as a learner including how to access ASMI's Complaints and Appeals processes and what my rights are if ASMI or a third party delivering training and assessment on their behalf, closes or ceases to deliver any part of the training product I am enrolled in.
- I understand and accept the terms and conditions of enrolment as specified on this application form.

Student Signature		Date	
Parent/Guardian Signature <i>(required for students under 18 years)</i>		Date	

Agent Information				
Agent Name		Contact Person		
Phone		Email		
Street Address			Suburb	
Suburb		State		Post Code