

# INTERNATIONAL APPLICATION FORM

Please print clearly in **BLOCK** letters

## STUDENT'S PERSONAL DETAILS

Title:  Mr  Mrs  Ms  Miss  Other

Family Name:

Given Name:

Preferred Name:

Date of Birth: dd/mm/yy

Gender:  Female  Male  Other

Passport Number:

Country of Birth:

Nationality:

Do you already have an Australian Visa that will allow you to study at Sarina Russo Institute?  Yes  No

Please select type of Visa you have or are applying for?  Student  Working Holiday  Tourist  Other:

Do you speak a language other than English at home?  No  Yes, which one?

If yes, how well do you read, write and speak English?  Very Well  Well  Not Well  Not at all

## PERMANENT ADDRESS IN HOME COUNTRY

Street Number/Name:

Suburb/Town:

Country: Postcode:

Phone (mobile):

Phone (home):

Email:

## ADDRESS IN AUSTRALIA

Street Number/Name:

Suburb/Town:

Postcode:

Phone (mobile):

Phone (home):

## PROGRAM SELECTION

Intensive General English

Start Date: dd/mm/yy

Duration:

Unipath English 1

Start Date: dd/mm/yy

Duration:

Unipath English 2

Start Date: dd/mm/yy

Duration:

Bridging English Entry Program  2 Jan 2019  25 Mar 2019  15 Apr 2019  22 Jul 2019  12 Aug 2019  11 Nov 2019

## FURTHER STUDY OPTIONS

James Cook University Brisbane

Russo Business School

Other, please specify:

## ENGLISH LEVEL TEST

Test Type: Test Score: Test Date: dd/mm/yy

Secondary or tertiary education conducted in English medium

Name of School: Program: Highest Level:

If you are currently enrolled in an ELICOS school, please specify:

Provider Name: Current English Level:

## OVERSEAS STUDENT HEALTH COVER

Do you require us to organise Overseas Student Health Cover (OSHC)?  Yes  No If YES, please indicate:  Single  Dual  Multi

For more information on OSHC, please visit the Allianz Global Assistance website: [www.oshcallianzassistance.com.au](http://www.oshcallianzassistance.com.au)

## EMERGENCY CONTACT

Name: Relationship to you:

Best Phone Number: Medical Condition:

## SPONSORED STUDENTS ONLY (Please attach sponsorship letter if available)

Name of organisation sponsoring you:

## CREDIT TRANSFER (CT) / RECOGNITION OF PRIOR LEARNING (RPL)

If you hold previous qualifications or industry experience in the area you are studying, you have the right to apply for credit transfers on units already undertaken or recognition of your prior learning on the job.

Do you wish to apply for credit transfer or RPL?  Yes  No  Unsure, can Sarina Russo Institute please contact me to discuss this

If yes, please attach supporting documents including any transcripts of previous study, evidence of work experience etc. that might apply and Sarina Russo Institute will contact you to discuss your options.

## EDUCATIONAL QUALIFICATIONS

Name of school or institution	Name of qualification or course	Years attended		Course Completed
		From (Month/Year)	To (Month/Year)	

Please attach certified copies of transcripts of all academic records. (A certified copy means a stamped photocopy signed by a public notary or institution representative as being a true and accurate record of the original document). All documents must be translated into English by the issuing institution or by an official translating service.

## EMPLOYMENT STATUS

Are you currently employed?

- Full-time employee       Part-time employee       Unemployed - seeking full-time work       Unemployed - seeking part-time work  
 Employer       Not employed - not seeking employment       Employed - unpaid in family business       Self employed - not employing others

## STUDY REASON

Of the following, which describes your main reason for undertaking studies at Sarina Russo Institute? (Please select one)

- For personal interest or self-development       To get a job       To gain credit into further study       To train towards a different career       As a requirement of my job  
 To gain extra skills for my job       To get a better job or promotion       To start my own business       To develop my existing business  
 Other reasons:

## MEDICAL CONDITIONS/DISABILITY

Do you have any medical, physical restrictions, disabilities, addictions, impairments or long term conditions? If yes, then tick ANY applicable boxes:

- Physical       Intellectual       Medical Condition       Hearing Impairment/Deaf       Mental Illness       Acquired Brain Impairment       Vision       Learning  
 Other (Please provide details):

## DECLARATION

Please visit [www.sri.edu.au](http://www.sri.edu.au) for full Conditions of Enrolment.

### CONFIDENTIALITY

The Australian Vocational Education and Training Management Information Statistical Standard (AVETMISS) is a nationally consistent standard for the collection, analysis and reporting of vocational education and training information throughout Australia. The national data collection agency is National Centre for Vocational Education Research (NCVER). AVETMISS reporting to NCVER is required from all training organisations. Under national statistical reporting protocol, NCVER will not release any information that identifies or could be used to identify individual clients, or training organisations.

### DECLARATION

I declare that the information I have supplied in this application form is, to the best of my knowledge, complete and correct. I acknowledge that my application for admission is subject to acceptance by Sarina Russo Institute, which has power to impose conditions. I further acknowledge that in the event my application for admission as a student at Sarina Russo Institute is accepted, and in consideration of provision of educational resources by Sarina Russo Institute, I will be bound by the provisions of Sarina Russo Institute's relevant student handbooks, statutes, rules and policies as are in force from time to time, and will be subject to the lawful instructions of officers of Sarina Russo Institute.

I understand that information on this form is collected for enrolment and administrative purposes. Information is otherwise held in accordance with the Privacy Act 1988 and may be made available to Australian Government agencies and the Fund Manager of the ESOS Assurance Fund, pursuant to obligations under the ESOS Act 2000 and the National Code (2007), and otherwise in accordance with our Privacy Policy and Consent Notice available at <http://www.sri.edu.au/privacy.aspx>. The applicable law for this agreement shall be the law of Queensland, Australia.

### AGREEMENT

I have read and understood the Conditions of Enrolment of the Institution as specified on the website or as stipulated in the student prospectus.

I understand that, if I have indicated on this form that I wish to apply for entry to a Sarina Russo Institute (SRI) program, copies of this form and all supporting documents will be forwarded to SRI for consideration. I understand that timetables may vary between morning, afternoon and evening.

I understand if I don't have a USI, SRI can apply on my behalf if appropriate identification has been supplied.

## SIGNATURE

Applicant's Signature: \_\_\_\_\_ Date: dd/mm/yy

For student's under the age of 18, a parent/guardian signature is required.

Parent/Guardian Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: dd/mm/yy

### SIMPLIFIED STUDENT VISA FRAMEWORK (SSVF)

I make this declaration in relation to my application for my preferred course/s at Sarina Russo Institute (SRI). I understand that the University will rely on this declaration in relation to any offer of enrolment in the course which is made to me. I understand the University will rely on this declaration in relation to any offer of enrolment in the course which is made to me.

I declare that:

- I am a Genuine Temporary Entrant and a Genuine Student\*;
- Studying the course is my primary purpose for coming to Australia;
- I understand that if I am granted an Australian student visa, I will have to comply with the conditions on that visa;
- I believe that I am academically qualified for the course I have applied for and have, or will have, the English proficiency level required to commence the course;
- I have calculated the cost of my course, am aware of the current exchange rate between the currency of my home country and the Australian dollar and understand that the exchange rate will vary from time to time;
- I have genuine access to the total funds required, while in Australia, to cover all tuition fees, travel (including return airfare), living costs and overseas student health cover for myself and my dependants (if any) for the duration of the course; and
- If I have ever been refused a visa for entry into Australia, I have advised SRI and provided a copy of the visa refusal notification from DIBP and any other relevant documentation.

\* For the definition of Genuine Temporary Entrant and details of other requirements under SSVF visit: <https://www.border.gov.au/Busi/Educ/simplified-student-visa>

## REPRESENTATIVE/AGENT STAMP

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