**Part A: Personal Details**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Surname: |  | Title: | Mr/ Mrs/ Miss/ Ms/ Dr | D.O.B |  / / |
| First Name: |  | Middle Name/s |  |
| Home Phone: | ( ) | Work Phone: | ( ) |
| Email: |  |
| Unique Student Identifier (USI), if known:\* |  |
| Gender: (Circle one only)  | Male Female Other |
| Please note that all applicants are required to be 18 years or above. |
| *\* Please write the name that you used when you applied for your Unique Student Identifier (USI), including any middle names. If you do not yet have a USI and want BCC Institute 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 are using. See section on the USI at the end of this form for a detailed explanation.*  |
| Home Address (Overseas or in Australia) |
| Building/property name: |  |
| Flat/unit details: |  | Street number/ lot number: |  |
| Street name: |  |
| Suburb, locality or town: |  |
| State/ territory (if applicable): |  | Postcode: |  |
| Country: |  |
|  |
| Residency and other Visa Details |
| Country of Birth: |  | Citizenship: |  |
| Passport number: |  |
| Do you already have an Australian Visa that allows you to study here? | * Yes
* No
 | If yes, what type of Visa? |  |
| Visa grant number: |  |
| Visa entry date: |  | Visa exit date: |  |
|  |
| Next of Kin/Emergency Contact |
| Name: |  | Relationship to you: |  |
| Address: |  |
| Country: |  | Postcode: |  |
| Home Phone: | ( ) | Work Phone: | ( ) |
| Mobile: |  | Email: |  |

**Part B: Language and Cultural Diversity**

1. Country of birth? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. What is your first language? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. What other languages do you speak? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. International English test type (e.g. IELTS, TOEFL, PTE, OET): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. English test score: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part C: Disability**

1. Do you consider yourself to have a disability, impairment or long-term conditions?
	* Yes
	* No
2. If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list: (You may indicate more than one area.) Please refer to the Disability supplement for an explanation of the following disabilities:
	* Hearing/deaf
	* Physical
	* Intellectual
	* Learning
	* Mental illness
	* Acquired brain impairment
	* Vision
	* Medical condition
	* Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part D: Education**

1. Have you SUCCESSFULLY completed any of the following qualifications? Yes No

If YES, tick ANY applicable boxes:

* + Bachelor degree or higher degree
	+ Advanced diploma (or associate degree)
	+ Diploma (or associate diploma)
	+ Certificate IV (or advanced certificate/ technician)
	+ Certificate III (or trade certificate)
	+ Certificate II
	+ Certificate I
	+ Year 12 or Secondary School
	+ Other education (including certificate or overseas qualification not listed above)
1. Do you wish to apply for Course Credit? Yes No

If YES, certified copies of transcripts from previous qualifications must be provided with

this form.

1. Do you wish to apply for Recognition of Prior Learning? Yes No

If YES, you will be contacted to discuss further.

**Part E: Employment**

Of the following categories, which BEST describes your current employment status? (Tick ONE box only). For casual, seasonal, contract and shift work, use the number of hours worked per week to determine whether full time (35 hours or more per week) or part time (less than 35 hours per week).

* Full-time employee
* Part-time employee
* Self-employed – not employing others
* Self-employed – employing others
* Unemployed – seeking full-time work
* Unemployed – seeking part-time work
* Not employed – not seeking any employment

**Part F: Study Purpose**

Of the following categories, which BEST describes the main reason you are taking this course?
(Tick ONE box only).

* To get a job
* To develop my existing business
* To start my own business
* To try and get into a different career
* To get a better promotion
* It was a requirement of my job
* I want extra skills for my job
* To get into another course of study
* For personal interest or self-development
* Other reasons

**Part G: Enrolment Details – Select your course and campus**

|  |  |
| --- | --- |
| **Qualification/course** | **Duration** |
|  ICT20120 Certificate II in Applied Digital Technology(CRICOS Code 105671K) | 20 weeks classes + 4 weeks holidays |
|  FSK20119 Certificate II in Skills for Work and Vocational Pathways(CRICOS Code 105670M) | 20 weeks classes + 2 weeks holidays |
|  CHC30121 Certificate III in Early Childhood Education and Care(CRICOS Code 107223G) | 40 weeks classes + 12 weeks holidays |
|  CHC50121 Diploma of Early Childhood Education and Care(CRICOS Code 107029J) | 60 weeks classes + 16 weeks holidays |
|  BSB40920 Certificate IV in Project Management Practice(CRICOS Code 105668E) | 34 weeks classes + 6 weeks holidays |
| BSB50420 Diploma of Leadership and Management(CRICOS Code 104274J) | 40 weeks classes + 12 weeks holidays |
| BSB60420 Advanced Diploma of Leadership and Management(CRICOS Code 105030K) | 50 weeks classes + 14 weeks holidays |
|  FNS40222 Certificate IV Accounting and Bookkeeping(CRICOS Code 0109994C) | 40 weeks classes + 12 weeks holidays |
|  FNS50222 Diploma of Accounting(CRICOS Code 111418F) | 50 weeks classes + 14 weeks holidays |
|  CHC33021 Certificate III in Individual Support\*(CRICOS Code 114163M) | 40 weeks classes + 12 weeks holidays |
|  CHC43121 Certificate IV in Disability Support (CRICOS Code 114164K) | 40 weeks classes + 12 weeks holidays |
|  CHC32015 Certificate III in Community Services(CRICOS Code 105669D) | 50 weeks classes + 14 weeks holidays |
|  CHC52021 Diploma of Community Services (CRICOS Code 114165J) | 80 weeks classes + 24 weeks holidays |

\*This course is a pre-requisite for Certificate IV in Disability Support

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Preferred start: |  February |  April | July |  October |
| Campus locations: (Please pick one) |  Bankstown - L1, 457 Chapel Road, Bankstown City - L1, 16-22 Wentworth Avenue, Surry Hills |
| I elect to pay more than 50% of the course fees upfront |  Yes No |
| Do you require BCC Institute to arrange homestay accommodation? |  Yes No |
| Do you require BCC Institute to arrange Overseas Student Health Cover (OSHC)? |  Yes No |
| *\*OSHC insurance is a requirement for a student visa application from the Department of Home Affairs. Single cover is for one student only, Couple cover is for the student and spouse/partner, Family cover is for the student and dependents (including spouse, partner and dependent children).* |

**Part H: Genuine Temporary Entrant (GTE) Assessment**

|  |
| --- |
| ALL APPLICANTS MUST COMPLETE THIS PART OF THE FORM.**About this section:**This section helps BCC Institute assess whether you meet the Australian Government’s Genuine Temporary Entrant (GTE) criteria. It is important that the section is correctly completed and that all required documentation is attached. For further information, go to:*https://immi.homeaffairs.gov.au/visas/getting-a-visa/visa-listing/student-500/genuine-temporary-entrant*If you (i) are applying for a student visa from outside Australia and (ii) you are required by DEPARTMENT OF HOME AFFAIRS to provide proof of funds with your visa application, you must then complete this section through a BCCI Representative. Find BCCI representatives at [www.bcci.edu.au](http://www.bcci.edu.au/).Offer letters will be issued only if BCC Institute considers that you will meet the GTE requirements. In addition to assessment of this section, BCCI may interview you as part of the GTE assessment process. |
|  | Satisfactory response |
| **Background**1. **How did you find out about BCC Institute? (If the space provided below is not enough please provide your answers on a separate sheet).**
 |  Yes No |
| 1. **Have you read a BCC Institute brochure or checked the BCCI website?  Yes  No**

 |  Yes No |
| 1. **Why did you choose BCC Institute over other providers in Australia or overseas?**
 |  Yes No |
| 1. **Please name other training providers (both overseas and within Australia) that you considered enrolling in.**
 |  Yes No |
| 1. **Have you or your dependants been refused into Australia before?**

If Yes, when and for what reason? Include date of refusal. Yes No |  Yes No |
| 1. **How many years since you last studied? If there is a gap in your studies please explain what you have been doing during this gap.**
 |  Yes No |
| 1. **Relationship status (circle one):**

Single Engaged Married De Facto Separated Divorced WidowedIf married, how long \_\_\_\_\_\_\_\_\_\_\_\_ |  |
| 1. **Do you have any dependants?** If Yes, how many \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 |  |
| 1. **Will any dependants:**

Travel to Australia  Remain at home |  Yes No |

|  |  |
| --- | --- |
| 1. **Funding of your studies**
2. **Are you aware of the living costs associated with your studies in Australia? Yes No**

Please see <https://www.studyinaustralia.gov.au/english/live-in-australia/living-costs> |  Yes No |
| 1. **Do you have access to sufficient funds to support you and your dependents (if any) for the TOTAL period of your stay in Australia?**

 **Yes No**This includes tuition fees, travel costs, return flights, living costs as outlined on the Australian Government website:<https://www.studyinaustralia.gov.au/english/live-in-australia/living-costs> |  Yes No |
| 1. **List details of financial support during your stay in Australia.**

|  |  |  |
| --- | --- | --- |
| Financial support | AUD $ | Your currency |
| Self |  |  |
| Parents |  |  |
| Spouse |  |  |
| Loan |  |  |
| Other |  |  |

 |  Yes No |
| 1. **What are the expected expenses for tuition fees for the entire duration of the course?**

|  |  |
| --- | --- |
| Name of Your Course | Your Expected Tuition Fees |
|  |  |
|  |  |
|  |  |

 |  Yes No |
| 1. **Please provide evidence of your/parents’/spouse’s income or evidence of an approved bank loan.**

Check the DEPARTMENT OF HOME AFFAIRS evidence requirements at immi.homeaffairs.gov.au/visas/web-evidentiary-tool |  Yes No |
| 1. **Are you aware of and have you read the BCC Institute fee refund policy? Yes No**
 |  Yes No |
| 1. **Are you aware of the work restrictions while studying full-time in Australia? Yes No**

https://immi.homeaffairs.gov.au/visas/already-have-a-visa/check-visa-details-and-conditions/check-conditions-online |  Yes No |
| 1. **Do you have any relatives in Australia? Yes No**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_ Immigration status: \_\_\_\_\_\_\_\_\_\_\_\_
 |  Yes No |
| 1. **Please indicate the type of accommodation you intend to live in while studying with BCC Institute.**  Homestay Relative Friend Shared accommodationOther (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_If you have pre-arranged accommodation, please provide the address: Number and Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Suburb/Town/City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode:\_\_\_\_\_\_\_\_\_\_\_\_
 |  Yes No |

**Part I: Assessment – To be completed by the Agent representing Student.**

1. Applicant’s BCC Institute course is related to their previous studies or employment. Yes No
2. Applicant has career goals and has researched the value of the course to their future. Yes No
3. Applicant’s knowledge of BCC Institute, course, campus and living arrangements is satisfactory. Yes No
4. Applicant has a strong incentive to return to their home country and does not have strong incentive to remain in Australia. Yes No
5. Applicant has realistic expectations of costs for them and all their family members. Yes No
6. Applicant’s previous Visa and travel history is satisfactory. Yes No
7. Applicant has realistic expectations about their ability to find work and their likely income in their location.
8. I have checked the applicant’s documents, including financial and academic documents, and verified copies are attached. Yes No
9. I consider that this applicant meets DEPARTMENT OF HOME AFFAIRS Genuine Temporary Entrant (GTE) criteria. Yes No

Recommend interview by BCC Institute? Yes No

I therefore recommend that an offer be given to this applicant. Yes No

I confirm that I have briefed the applicant and the applicant’s parents (if applicant is under 18) on the Terms and Conditions relating to this application and that I have provided the applicant with relevant information on BCC Institute and the course consistent with the requirements of the ESOS Act 2000 and the National Code 2018.

Signature of agent making recommendation

Are you a registered agent with BCC Institute? Yes No

|  |
| --- |
| **Agent Declaration** |
| Name of Agent: |  |
| Company Name: |  |
| Contact Details of Agent: |  |
| Signature: |  | Date: |  |

**Part J: Application Checklist**

**Application Checklist – Provide a certified copy of the following documents with your application (you will need to bring the originals to your orientation day for verification):**

* Completed Enrolment Application Form
* Passport copy (JP signed or notarised)
* Valid visa (if you are applying onshore)
* Proof of English language proficiency (IELTS 5.5 or equivalent)
* Proof of meeting academic requirements (high school or other relevant certificate)

**Part K: Declaration**

In signing this Enrolment Application Form, I agree that the information provided on this form is true, correct and complete. I acknowledge and agree that this is an application only to study at BCC institute and does not guarantee me a place. If an offer is made to me, my acceptance is subject to the terms and conditions in the Letter of Offer.

|  |  |  |  |
| --- | --- | --- | --- |
| Student Signature: |  | Date: |  |
| Printed name: |  |