

Student Application Form

| 1. APPLICANT DETAILS: | | | |
|--|---|--------------------------|--------------------|
| Given Names | | Family Name | |
| Gender | <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other | Date of Birth | ____ / ____ / ____ |
| Country of Birth | | Passport No | |
| Country of Citizenship | | USI Number <i>if any</i> | |
| Marital Status (Please tick one) | <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> De facto <input type="checkbox"/> Other | | |
| 2. CONTACT FOR CORRESPONDENCE: | | | |
| Address | | | |
| Telephone | | Your Mobile | |
| Email <i>(Must provide your email)</i> | | | |
| 3. HOME COUNTRY DETAILS (Must not be an Australian address): | | | |
| Address | | | |
| Telephone | | Email | |
| 4. EMERGENCY CONTACT DETAILS: | | | |
| Contact Name | | | |
| Relationship | | | |
| Address | | | |
| Telephone | | Email | |
| 5. AGENCY DETAILS: | | | |
| Agency Name | | | |
| Counsellor Name | | | |
| Address | | | |
| Telephone | | Email | |

6. COURSE DETAILS:

| Course Code | Course Name | CRICOS Code | Duration | Tuition Fees (Per Year)* | Select |
|---|---|-------------|-----------|---|--------------------------|
| BSB40120 | Certificate IV in Business | 106816A | 52 Weeks | \$9,000* | <input type="checkbox"/> |
| BSB50120 | Diploma of Business | 106812E | 52 Weeks | \$12,000* | <input type="checkbox"/> |
| BSB60120 | Advanced Diploma of Business | 106813D | 52 Weeks | \$12,000* | <input type="checkbox"/> |
| BSB80120 | Graduate Diploma of Management (Learning) | 104967B | 104 Weeks | \$12,000* (\$24,000 course fee) | <input type="checkbox"/> |
| ICT50220 | Diploma of Information Technology | 106814C | 78 Weeks | \$12,000* (\$18,000 course fee) | <input type="checkbox"/> |
| ICT60220 | Advanced Diploma of Information Technology | 106815B | 78 Weeks | \$12,000* (\$18,000 course fee) | <input type="checkbox"/> |
| CHC33021 | Certificate III in Individual Support | 111833B | 52 Weeks | \$12,000 | <input type="checkbox"/> |
| CHC43015 | Certificate IV in Ageing Support | 111831B | 52 Weeks | \$12,000 | <input type="checkbox"/> |
| CHC52021 | Diploma of Community Services | 111835M | 104 Weeks | \$12,000 (\$24,000 course fee) | <input type="checkbox"/> |
| RII60520 | Advanced Diploma of Civil Construction Design | 111836K | 104 Weeks | \$12,000* (\$24,000 course fee) | <input type="checkbox"/> |
| Enrolment fee (<i>applies to all courses</i>) | | | | \$200 | |
| Material fee (<i>applies to all courses</i>) | | | | From \$300 to \$2000 depending on the course you choose | |

Fees do not include enrolment and material fees. For the full list of fees and charges, please [click here](#).

| | | | | | | | | |
|---|--|---|--|---|--|---|--|---|
| Entry Requirements (Evidence of meeting these entry requirements must be provided on application) | <input type="checkbox"/> Must be over 18 years (Passport), and <input type="checkbox"/> IELTS 6 or equivalent (no band less than 5.5) (Test Result), and <input type="checkbox"/> Completion of Year 12 or equivalent and above (Academic Certificates) in any discipline | | | | | | | |
| | When do you wish to begin your studies? (Tick One) | Term 1 1st Intake <input type="checkbox"/> JAN 2nd Intake <input type="checkbox"/> FEB | | Term 2 1st Intake <input type="checkbox"/> APR 2nd Intake <input type="checkbox"/> MAY | | Term 3 1st Intake <input type="checkbox"/> JUL 2nd Intake <input type="checkbox"/> AUG | | Term 4 1st Intake <input type="checkbox"/> SEP 2nd Intake <input type="checkbox"/> NOV |

7. FURTHER INFORMATION: (Questions below correspond directly to the AVETMISS Data Collection Requirements)

| | | |
|--|--|--|
| i. In which country were you born? | <input type="checkbox"/> Australia | <input type="checkbox"/> Other, please specify: |
| ii. Do you speak a language other than English at home? (If more than one language is spoken at home, indicate the one that is spoken most often) | <input type="checkbox"/> No, English only English only, Go to question (iv) | <input type="checkbox"/> Yes, please specify: |
| iii. How well do you speak English? (Please tick one) | <input type="checkbox"/> Very well | <input type="checkbox"/> Well <input type="checkbox"/> Average |
| iv. Are you of Aboriginal or Torres Strait Islander origin? (Please tick one) | <input type="checkbox"/> Yes, Aboriginal | <input type="checkbox"/> Yes, Torres Strait Islander <input type="checkbox"/> No |
| v. Do you identify yourself as having a disability, impairment or long-term condition? (Please tick) | <input type="checkbox"/> Yes | <input type="checkbox"/> No, please go to question (vii) |
| vi. If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list (Please indicate more than one area if applicable) | | |
| <input type="checkbox"/> Hearing/deaf (11) <input type="checkbox"/> Physical (12) <input type="checkbox"/> Intellectual (13) <input type="checkbox"/> Learning (14) <input type="checkbox"/> Mental Illness (15) | <input type="checkbox"/> Acquired brain impairment <input type="checkbox"/> Vision <input type="checkbox"/> Medical condition <input type="checkbox"/> Other - please specify | |
| vii. What is your highest COMPLETED school level? (Please tick ONE box only) | | |
| <input type="checkbox"/> Year 12 or equivalent (12) <input type="checkbox"/> Year 11 or equivalent (11) <input type="checkbox"/> Year 10 or equivalent (10) | <input type="checkbox"/> Year 9 or equivalent <input type="checkbox"/> Year 8 or below <input type="checkbox"/> Never attended school - go to question 16 | |

| | |
|--|---|
| viii. In which YEAR did you complete that school level? | |
| ix. Are you still attending secondary school? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| x. Have you successfully completed any of the following qualifications? | <input type="checkbox"/> Yes <input type="checkbox"/> No - go to question (xii) |
| xi. If yes, please tick any of the applicable boxes | <input type="checkbox"/> Bachelor's 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"/> Certificates other than the above |
| xii. Of the following categories, which best describes your current employment status? | <input type="checkbox"/> Full-time employee <input type="checkbox"/> Part-time employee <input type="checkbox"/> Self-employed - not employing others <input type="checkbox"/> Employer <input type="checkbox"/> Employed - unpaid worker in family business <input type="checkbox"/> Unemployed - seeking full-time work <input type="checkbox"/> Unemployed - seeking part-time work <input type="checkbox"/> Not employed - not seeking employment |
| xiii. Of the following categories, which best describes your main reason for undertaking this course/traineeship/apprenticeship? (Tick ONE box only) | <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 |
| 8. RECOGNITION OF PRIOR LEARNING (RPL) / CREDIT TRANSFER: | |
| Do you want to apply for RPL and/ or credit transfer? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, you need to submit the Credit/RPL form from our website or College reception. | |
| 9. SERVICE DETAILS: | |
| The following services can be arranged by Sydney Metropolitan International College. Please note that the Australian Government requires all international students on a student visa to have Overseas Student Health Cover (OSHC) for the duration of their visa: | |
| Overseas Student Health Cover | Do you require the College to arrange OSHC? |
| | If yes, specify the duration required: <input type="checkbox"/> _____ months |
| Airport Pickup | Do you require the College to arrange airport pickup? Yes <input type="checkbox"/> No <input type="checkbox"/> |
| | If yes, specify the date/time of arrival: |
| Accommodation Services | Do you require the College to assist with accommodation services? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | If yes, please complete the accommodation profile: |
| 10. PAYMENT METHOD: | |
| Payment method | Payment can be made by bank transfer to the account below: Account Name: Sydney Metropolitan International College Account Number (A/C): 751623 Branch Number (BSB): 032062 Branch Address: 168 Burwood Rd, Burwood NSW 2134 Bank Name: Westpac Bank Swift Code: WPACAU2S |

11. STUDENT DECLARATION:

By signing this form, I certify that the information provided is true and correct. I further certify that:

1. I have selected the course(s) and other services outlined and agree to pay the associated fees.
2. I understand that any false statements or evidence provided may result in termination of enrolment.
3. I understand that should my application result in an offer of a place, I will receive a Letter of Offer and International Student Acceptance Written Agreement that specifies the course(s) chosen, fees and conditions for acceptance and constitutes the agreement between the student and Sydney Metropolitan International College, and
4. I understand that in the event that my application does not result in an offer of a place, I will receive a written advice to explain the reasons.

Full name: _____

Signature: _____ Date: ____ / ____ / ____

12. AGENT DECLARATION AND SIGNATURE:

This declaration must be signed by a representative who has an agreement with SMIC.

I declare that:

1. All relevant checks have been conducted to ensure the student is genuine and genuine temporary entrant and intends to abide by the conditions of the student visa.
2. The applicant (and any dependents) has been provided with sufficient information relation to the course and SMIC including tuition fees, health cover, living expenses etc.
3. All academic and other documents are verified for their authenticity.
4. The applicant understands and agrees to the SMIC application terms and conditions available on our websites, and
5. All information provided with this application is true and correct.

| | | | |
|----------------------------------|--|-------------|--------------------|
| Name of Agent/ Counsellor | | | |
| Signature | | | |
| Company Stamp | | Date | ____ / ____ / ____ |

13. CHECKLIST

- Completed all sections of the applications?
- Enclosed certified copy of your passport?
- Enclosed certified copy of qualifications including academic transcripts?
- Enclosed details of English language proficiency?
- Enclosed a certified copy of your RPL details? (if applicable)
- Enclosed a certified copy of your visa? (if applicable)

14. SEND APPLICATION TO:

Student Admissions

Sydney Metropolitan International College Pty Ltd

432 - 434 Kent Street, Sydney NSW 2000, AUSTRALIA

Email: admissions@smic.edu.au; Telephone: +61 2 9744 1356; Website: www.smic.edu.au

Please note that this application is not an enrolment form and does not guarantee admission. An incomplete application will delay processing.

OFFICE USE ONLY

| | | | |
|------------------------------|---|---------------------------|--------------------|
| Data Received | | Application Number | |
| Further Communication | <input type="checkbox"/> Letter of Offer, Student Acceptance Written Agreement issued <input type="checkbox"/> International Student Acceptance Written Agreement issued <input type="checkbox"/> Formal Notification of Rejection issued | | |
| Manager's Name | | | |
| Signature | | Date | ____ / ____ / ____ |