

Email: contact@einsteincollege.vic.edu.au Website: www.einsteincollege.vic.edu.au

## **Application Form**International Student

• Please fill it in using C	APITAL/BLOCK LETTERS and to	ick (√) relevant option.		
PERSONAL DETAILS				
Title:	☐ Miss ☐ Mrs. ☐ Ms. ☐ Mr	. 🗆 Other		
Given Names:			Date of Birth (dd/mm/yyyy):	/ /
Family Name:			Gender: ☐ Male ☐ Female	
Have you been enrolled at	Einstein College of Australia previ	iously? □ Yes □ No	Student No. (If known):	
Are you currently enrolled	with any other Education Provide	r? □ Yes □ No. If Yes, plea	ase include a copy of all eCoes with y	our application
Do you have a Unique Stud	dent Identifier Number (USI)? 🗖	Yes □ No USI	No. (if Yes)	<del></del>
	your own USI at the USI website which we will be written with the website with the work of the website with the website website with the website website with the website website with the website website website with the website website website website website website with the website w			
Australian Contact De	etails (If available) – Place o	of Residence:		
Suburb/ Town:		State:	P	ost Code:
Telephone (H):			Fax (H):	
Telephone (W):			Fax (W):	
Mobile Phone:			Email Address:	
International Contact Address (Line1): Address (Line2): Suburb: Post Code: Telephone (H): Mobile Phone:	Details: (Home Country)	Country:		
Nationality Details: Nationality: Passport No: Passport Expiry Date:		First Lang Passport I Country o	Issuing Country:	
Do you hold a current Aust	ralian Visa? □ Yes □ No	VisaNumber:	Visa Granted Date:	
Visa Type:		Visa Expir	y Date:	
Relationship: Given Name: Family Name: Address (Line1): Address (Line2): Suburb:	ia (Emergency Contact Deta	Relationsl Given Nar Family Na Address (I Address (I Suburb:	me: Inme: Line1): Line2):	
State:		State/Pro	vince/Region:	

Application Form International Student Version 24

Create Date: 26 April 2018



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Website: www.einsteincollege.vic.edu.au

Post Code:	Post Code:
Telephone:	Country:
Mobile Phone:	Telephone:
Email Address:	Mobile Phone:
	Email Address:
Other Details:	
Do you have a disability,medical condition, impairment or long te Hearing/visual impairment, mobility requirements)?☐ Yes ☐ N	rm condition which requires special assistance from the College? (eg. o If you require assistance, please contact 03 9629 3693
If yes, please indicate the areas of disability, medical condition, im	pairment or long term condition:
☐ Hearing/Deaf☐ Physical ☐ Intellectual ☐ Learning☐ Mental IIII☐ Other, please specify	ness □Aquired Brain Impairment □Vision □Medical Condition
In what country were you born? □Australia □Other, please spe	ecify
Do you speak a language other than English at home ?□No, Engli	sh Only Other, please specify
How well do you speak English (if you answered Yes above ? □Ve	ry Well□Well □Not Well □Not at all
VSN Details  Are you now to the Victorian Education system or do not have you	ur Victorian Student Number (VSN)2 To be completed by all students aged up
to 24 years.	ur Victorian Student Number (VSN)? To be completed by all students aged up
$\hfill \square$ Yes. I am new to the Victorian Education System. I have never since 2011. (Students who are enrolling for the first time since the	attended a Victorian school since 2009, TAFE or other VET training provider VSN was introduced will get a new VSN)
□No:	
If you are aged 24 or below at time of enrolment, please provide	your Victorian Student Number:
<del>-</del>	
	ctorian school since 2009, TAFE or other VET training provider since 2011.
Please list the most recent training	
AGENT DETAILS: Please Whi	ch country are you in when completing this
stamp (if applicable) form	<del></del>
	ralian Visa Processing Centre where you
	apply for your visa
Counselor Name: Coun	ntry: City:
Where should we send the notification of your application result?  ☐ My Australian Contact Details ☐ My International Co	



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## **COURSE DETAILS**

Please indicate the course (s) you are applying for:								
CR	ICOS Code	Course	Course Duration	Tuition Fee AUD	Enrolment Fee AUD (Non- refundable)	Material & Services Fee AUD	Course Start Date (If you are not sure provide month/year)	Tuition Fees You Wish to Pay Before Course Commencement
	097526A	General English	1-52 Weeks	\$295/ week	\$300	Max. \$500 (Min. \$100 per course level)		If enroled more than 25 weeks ☐ Only 50% ☐ More than 50%
	097527M	English for Academic Purposes (EAP)	5-20 Weeks	\$295/ week	\$300	Max. \$500 (Min. \$250 per course level)		
	092082J	CHC33015 Certificate III in Individual Support	48 Weeks	\$10,000	\$300	\$500		☐ Only 50% ☐ More than 50%
	092083G	CHC43015 Certificate IV in Ageing Support	76 Weeks	\$14,500	\$300	\$1,000		☐ Only 50% ☐ More than 50%
	087262C	BSB50215 Diploma of Business	52 Weeks	\$9.750	\$300	\$500		☐ Only 50% ☐ More than 50%
	087526F	BSB60215 Advanced Diploma of Business	52 Weeks	\$9.750	\$300	\$500		☐ Only 50% ☐ More than 50%
	096689A	FNS50215 Diploma of Accounting	52 Weeks	\$9.750	\$300	\$500		☐ Only 50% ☐ More than 50%
	096690G	FNS60215 Advanced	64 Weeks	\$12,000	\$300	\$500		☐ Only 50% ☐ More than 50%

Note: Overseas Student Health Cover (OSHC)Fees will apply if you do not supply evidence of a current insurance certificate

Does your chosen course meet your career needs and/ or goals? ☐ Yes ☐ No					
ENGLISH PROFICIENCY  Do you hold a current certificate of English profeciency (e.g. IELTS)?   Yes   No  English Test Type (e.g. IELTS)  English Test Score:					
If you have not yet sat your exam, please indicate the exam date:					
LANGUAGE, LITERACY AND NUMERACY (LLN)					
Are you willing to complete a Language, Literacy and Numeracy assessment by the College?   Yes   No  OVERSEAS STUDENT HEALTH COVER (OSHC) INSURANCE DETAILS  Do you hold any current Health Insurance?  Yes   No  If No do you want the College to organise this for you?  Yes   If Yes   If Yes   If Yes   Yes   If Yes   If Yes   Yes	No				
Single cover□ Couple Cover□ Family Cover□					

Diploma of Accounting



**SCHOOLING** 

Ground Floor, 313 – 315 Flinders Lane Melbourne Victoria 3000, Australia Phone: 0061-3-9629 3693 Fax: 0061-3-9629 7146

Email: <a href="mailto:contact@einsteincollege.vic.edu.au">contact@einsteincollege.vic.edu.au</a>
Website: <a href="mailto:www.einsteincollege.vic.edu.au">www.einsteincollege.vic.edu.au</a>

If you require accommodation or airport pick up arranged, please speak to the Student Services Department

What is your highest COMPLETED school level? ☐ Year 12 ☐ Year 11 ☐ Year 10 ☐ Year 9 ☐ Year 8 or lower

In which YEAR did you complete that school level?\_Please specify:\_\_

Are you still ATTENDING secondary school?□Yes □No

Qualifications (Highest Qualification First)	Institution	Country	Date of Completion
Quantitations (inglicate Quantitation inst)	motitution	Country	Date of completion
Do you intend to request for a Credit Transfer of Reconstruction of Prior Learning (RPL) Application Form.			o. If yes, please fill in a Credit Transfer or
WORK HISTORY			
Company	Years of	Service	
Position Title			
PAYMENT			
A request for payment or tuition and other fees will b	ne made if you rec	eive a letter of Offer. Pl	lease make your payment by bank cheque.
credit card, telegraphic transfer or direct deposit into			
obligation until funds are cleared and an official recei		stem conege of Austral	ia. Emstern conege of Australia has no
obligation until runus are cleared and an official recei	pt 13 135ucu.		
1. Tuition fees are fees directly related to provision of	of a course.		
2. A student can pay full fees if the student v			
tuition fees up front for the course before th			it are more than 25 weeks. The College car
require 100% of the total tuition fees for sho	rt courses of 25	weeks or less.	
Privacy Statement:		Declaration:	
Theinformation collectedin this form is for the purposeof pr	ocessing your		formation provided by me in this Application Form, is
pplication withthe Einstein College of Australia. The inform		Correct Loonfirm th	
he Collegein accordance with its Privacy Policy and Procedu			nat I have read, fully understand, and accept the
essessed and used by needle employed/angaged by the Co	ures and maybe	College TERMS AND	CONDITIONS and Policies and Procedures available
	ares and maybe llege.	College TERMS AND on the College Web	O CONDITIONS and Policies and Procedures available site, and agree to be bound by them including the
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accessed and used by people employed/ engaged by the Co The information maybe made available to government depa agenciesin relation to the College's obligations under law in Services to Overseas Students (ESOS) Act 2000(Cth), the Na The Australian Skills Quality Authority (ASQA) reported unde Vocational Education and Training Management Informatio (AVETMISS); and to ensure student compliance with the cor and their obligations under Australian immigration laws thre of Home Affairs. I understand that:Einstein College of Australia is required to Government, through the Department of Education and Ear Development, with student and training activity data which information I provide in this enrolment form. Information is provided in accordance with the Victorian VET Student Stati Guidelines (which are available at http://www.education.vic.gov.au/training/providers/rto/Pa x). The Department may use the information provided to it it	arres and maybe Illege. Illege. Introductional Code 2018 and er the Australian in Statistical Standard in Standard	College TERMS AND on the College Web Fee and Refund Pol tuition fees and agr and agree to the te  Applicant Signatu  Applicant Full Nat	O CONDITIONS and Policies and Procedures available beste, and agree to be bound by them including the licy, and that I have the financial capacity to meet the top ay fees as they become due. I acknowledge the rms described in this privacy statement stree:



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reporting and/or research activities. For these and other lawful purposes, the					
Department may also disclose information to its consultants, advisers, other					
government agencies, professional bodies and/or other organisations. I have been					
advised by the training organisation that I may be contacted and requested to					
participate in a National Centre for Vocational Education Research survey or a					
Department-endorsed project or audit or review.					
The Education and Training Reform Act 2006 requires Einstein College to collect					
and disclose my personal information for a number of purposes including the					
allocation to me of a Victorian Student Number, Unique Student Identifier and					
updating my personal information on the Victorian Student Register. You have a					
right to access and correct your personal information in accordance with privacy					
legislation and the College's Privacy Policy and Procudures. For more information					
in relation to how student information may be used or disclosed please access the					
Colleges Privacy Policy at: <a href="https://www.einsteincollege.vic.edu.au/pdfs/Privacy.pdf">https://www.einsteincollege.vic.edu.au/pdfs/Privacy.pdf</a>					
Provider Offer (College Use Only)					
1. Applicant's ID is sighted and the copy is attached:					
☐ Passport ☐ Birth Certificate					
2. Applicants Education Certificate is attached (if applicable): ☐ Yes					
3. Applicants IELTS or equivalent Certificate is attached (if applicable): $\Box$ Y	es				
Note: Documents that are not in English language must be accompanied by their English translations. Copies of documents must be certified.					
Provider Offer (Colle					
□No Offer or □Offer (indicate cou	•				
☐ General English	☐ BSB50215 Diploma of Business				
☐ English for Academic Purposes (EAP)	☐ BSB60215 Advanced Diploma of Business				
☐ CHC33015 Certificate III in Individual Support	☐ FNS50215 Diploma of Accounting				
☐ CHC43015 Certificate IV in Ageing Support	☐ FNS60215 Advanced Diploma of A				
E che-3013 certificate iv in Ageing Support	111300213 Advanced Diploma 017	tecounting			
Authorised Staff Name: Sig	nature:	Date: / /			