



Enrolment Form

Overseas Student

Instructions

Fill in all sections clearly and carefully by writing in block letters. This form must be completed by the intending student. **Forms completed by Agents will not be accepted.**

Information requested on this form is for national database; tracking purposes and assists in ongoing qualification issuance as required.

All data is confidential and is not forwarded to any other party with the exception of the national statistical database and federal government to inform future federal policies in Vocational Education and Training.

Overseas students need to provide a Genuine Student requirement statement along with this completed Enrolment Form.

Personal Details

Title	
Family Name	
Middle Name	
Given Name	
Date of Birth*	
Gender	

*Swann College does not accept enrolments for students Under 18 years of age.

Contact Information

Email	
Mobile Number	

Nationality

Country you were born in	
Country of citizenship	
Country of residence	
Visa Type*	
Visa Subclass*	
Passport No	

*If already onshore

Residential Address



Unit			
Street No. & Name			
Suburb/Town		Post Code	
State		Country	

Postal Address

<input type="checkbox"/>	Tick this box if Postal Address is same as Residential Address, if not please complete below table
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Unit			
Street No. & Name			
Suburb/Town		Post Code	
State		Country	

Emergency Contact Information

Person Name	
Relationship	
Contact Number	

Courses

Please select the Courses or qualifications you wish to enroll in:

Name of the course/qualification	Tick
AUR30320 – Certificate III in Automotive Electrical Technology (CRICOS Code: 105144M)	
AUR 30620 – Certificate III in Light Vehicle Mechanical Technology (CRICOS Code: 103647D)	
AUR31120 -Certificate III in Heavy Commercial Vehicle Mechanical Technology (CRICOS Code: 109334F)	
AUR31520 – Certificate III in Automotive Diesel Engine Technology (CRICOS Code: 112803M)	
AUR40216 – Certificate IV in Automotive Mechanical Diagnosis (CRICOS Code: 093787A)	
AUR40620 – Certificate IV in Automotive Electrical Technology (CRICOS Code: 105145K)	
AUR50116 – Diploma of Automotive Management (CRICOS Code: 105146J)	
AUR50216 – Diploma of Automotive Technology (CRICOS Code: 093788M)	
BSB50120 – Diploma of Business (CRICOS Code: 106034J)	
BSB60120 – Advanced Diploma of Business (CRICOS Code: 106035H)	
UEE60220 – Advanced Diploma of Electronics and Communications Engineering (CRICOS Code: 105143A)	



Credit Transfer/RPL

Do you wish to apply for Credit Transfer (CT) or Recognition of Prior Learning (RPL)?

CT		RPL	
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When do you want to start the course

Specific Month		Year	
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Employment Details

Of the following categories, which BEST describes your current employment status?

(Tick ONE box only)

<input type="checkbox"/> Full-time employee	<input type="checkbox"/> Part-time employee	<input type="checkbox"/> Employed unpaid worker
<input type="checkbox"/> Self-employed-not employing others work	<input type="checkbox"/> Employer	<input type="checkbox"/> Unemployed-seeking fulltime
<input type="checkbox"/> Unemployed-seeking part time work	<input type="checkbox"/> Not employed-not seeking	

Your Position	
Business Name	
Business Address	
Contact Number	

Schooling

Are you still attending secondary school? Yes No

* Swann College does not enrol students who are still in Secondary School.

If no, in which year did you complete school?

What is your highest completed school level?

Completed year 12		Completed year 11		Completed year 10	
Completed year 9		Completed year 8 or lower		Did not go to school	



Previously achieved qualifications

Have you successfully completed any of the following qualifications?

<input type="checkbox"/> Bachelor's degree or Higher Degree; Year completed:	<input type="checkbox"/> Certificate III (or Trade certificate); Year completed:
<input type="checkbox"/> Advanced Diploma or Associate Degree; Year completed:	<input type="checkbox"/> Certificate II; Year completed:
<input type="checkbox"/> Diploma (or Associate Diploma); Year completed:	<input type="checkbox"/> Certificate I; Year completed:
<input type="checkbox"/> Certificate IV (or Advanced Cert/Technician); Year completed:	<input type="checkbox"/> Certificates other than the above; Year completed:

Study Reason

Of the following categories, which BEST describes your main reason for undertaking this course? *(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 a different career
<input type="checkbox"/> To get a better job	<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

Unique Student Identifier (USI) Authority

Do you have a Unique Student Identifier (USI) number? Yes No

If yes, my USI number is:

If no, I authorise Swann College to apply for my USI number on my behalf. Yes No

You will need to supply a copy of your photo identification with your application form to obtain a USI from us or please obtain a USI number by visiting the website www.usi.gov.au.

Language and cultural diversity

Are you of aboriginal or Torres Strait Islander origin? No Yes

(For persons of both Aboriginal AND Torres Strait Islander origin, mark both "Yes" boxes)

Yes, Torres Strait Islander

Is English your first language Yes No

Do you speak a second language No, English only Yes, other:

How well do you speak English? Very well Well Not well Not at all

Have you completed an English Proficiency Test within the last 24 months? Yes No

If yes please attach a certified copy of your results



Disabilities

Do you have a disability, impairment or long-term condition that may impact your studies and for which you will require support? (You may indicate more than one area)

No		Vision		Hearing/Deaf		Physical		Medical Condition	
Other		Intellectual		Mental Illness		Learning		Acquired brain impairment	

Caring Responsibilities

Understanding any unpaid caring responsibilities you have can inform Swann College in addressing any barriers to participation in vocational education and training that may exist.

Do you have any caring responsibilities for a child/children and/or another adult/s?

Yes
 No
 Prefer not to say

If yes, please select all that apply:

If you share care responsibilities equally then please answer as the primary carer. A primary carer is defined as an individual who plays a substantial role in the care of another person, who may or may not have multiple primary carers. Primary thus describes the level of responsibility to care for another person, rather than being the sole carer for that person.

- Primary carer of a child or children (under 18 years)
- Primary carer of a child or children who is disabled or has a health condition or illness, or temporary care needs,
(Under 18 years).
- Primary carer or assistant for a disabled adult or adults (18 years and over)
- Primary carer or assistant for an older person or people (65 years and over)
- Secondary carer (another person carries out main caring role)
- Prefer not to say

Visa Information

Have you visited or studied in Australia before?

Yes No

Have you breached any visa conditions?

Yes No

Have you ever been refused a visa from entry in Australia?

Yes No

Have you ever been convicted of a crime or offence in any country?

Yes No



If yes to any of the above, please attach details.

Study Information

Have you previously applied or currently are applying for admission at other Australian education providers?

Yes No

If yes, please give details of all application processes and the outcomes.

Have you previously studied in Australia?

Yes No

If yes, please state:

Name of the institution:

Course/s taken:

Period of study:



Why did you choose to study in Australia and not in your home country?

Why have you chosen to study at Swann College?

Why have you chosen to study this course/s?



What are the key aspects of this course/s that interests you the most?

Please provide more details on the research you have done to base your decision to study in Australia and at Swann College.

Are you changing your area of study from previous studies or work experience? If yes, why?



What are your future plans and professional aspirations? How will this course help you achieve them?



What are your job prospects and salary expectations in your home country upon completion of this course? What position/roles within the industry are you considering applying for?

Family Information

Do you have any relatives or friends in Australia?

Yes No

If yes, please provide:

Name	Relationship to you	State they live in

Do you have any immediate family members (e.g. children, parents) who will remain in your home country whilst you are in Australia?

Yes No

Name	Relationship to you



What is your relationship status? Please specify:

Single Married Divorced/Separated

If you have a spouse/partner, is he/she coming to Australia with you, as a dependent on your student visa?

Yes No

If yes, has he/she previously applied for an Australia visa?

Please give details:

Do you have any children?

Yes No

If yes, how many and will they accompany you to Australia? _____

Expenses

What do you expect your total expenses to be for the duration of your stay in Australia? Please include the cost for dependents (if applicable).

Self

Tuition \$AUD:

Living Costs \$AUD:

Travel \$AUD:

Dependents, including partner

Living Costs \$AUD:

Travel \$AUD:



How will you pay for your tuition, your living expenses and your travel arrangements to Australia?

Please provide evidence of funds (e.g. bank statements for the past 3 months, loan documents, financial guarantee from your sponsor, etc).

Other Information

Please provide any other information relevant to Swann College when considering your application.

Document Checklist

Please ensure you have included the following applicable documents when submitting your Enrolment Form:

- | | |
|--|---|
| <input type="checkbox"/> Passport | <input type="checkbox"/> Visa information |
| <input type="checkbox"/> Birth certificate: not an extract | <input type="checkbox"/> English Language Test Results |
| <input type="checkbox"/> Unique Student Identifier (USI) | <input type="checkbox"/> Evidence of Qualification |
| <input type="checkbox"/> Resume | <input type="checkbox"/> Overseas Students Health Cover |
| <input type="checkbox"/> Financial Documents | |



Swann College’s Obligations

Swann College is responsible for the quality of the training and assessment in compliance with the Standards for Registered Training Organisations (RTOs) 2015, and for the issuance of the Australian Qualifications Framework [AQF] certification documentation.

Student Declaration

I understand information contained in these forms may be provided to Commonwealth agencies and research organisations and I consent to that occurring. I certify all details provided on these forms are true and correct.

I agree to pay the full course fees 14 days before the commencement of my course.

I understand I will be required to undertake a language, literacy and numeracy assessment.

I understand all relevant documentation including notes in relation to my enrolment; participation in training; course progress; identified needs and relevant support will be retained by Swann College.

I understand once my application is approved, I will be required to enter into an agreement by signing a Letter of Offer prior to Swann College issuing me a Confirmation of Enrolment for my visa application.

I understand further information regarding Swann College’s work experience component, policies and procedures as well as learning support and eligibility is available on its website: www.swanncollege.edu.au.

Student Sign:

Date:

Agent Declaration (if applying through an Agent)

I have assessed the applicant as a genuine student as defined by the Department of Home Affairs.

To my best knowledge, the applicant making this application has every intention of completing all programs listed in the application.

I have made every effort to verify the authenticity and validity of the documentation attached and related to this application. I am satisfied the applicant has access to the total funds required while in Australia to cover all costs for the duration.

I recommend Swann College proceed with the assessment of this application.

I confirm the student has signed this application form.

I declare to the best of my knowledge the information in this application is true and correct.

Agent Sign:

Date:

Agent Name:

Agent Business Name:

Payment Details

Please do not hesitate to contact Swann College if you require an Invoice prior to payment, however, a Receipt will be issued on your name once we receive the payment.

Account Name: - Swann College

Bank: - Bank SA

BSB: - 105-029

Account No: - 083417340

Office Use Only



Application Fee Paid Yes No Receipt Number

Application accepted Yes No

Accepted by: Sign Date

Rejected by: Sign Date

The reason for rejecting this application (if rejected):

Information entered on SMS Yes Date

Administrator Sign Date