



# Training Enrolment Application

## International Student

### Onshore Student

#### Instructions:

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

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

This enrolment form contains a compulsory Genuine Temporary Entrant (GTE) section that is required to be completed.

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#### Location:

Swann College currently has 2 locations in Australia. Please select from the below:

**Campus Location:**  Adelaide SA

Sydney NSW

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#### Personal Details

Title:  Mr  Ms  Mrs  Miss  Dr  Other

Family Name:

Given Names:

Residential Address:

Post Code:

Postal Address:

Post Code:

Phone:

Date of Birth:

Email:

Gender:

Emergency/Next of kin contact-Name:

Phone:

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#### Nationality

What Country were you born in?

Country of Citizenship:



**Course Details**

Name of Course/Qualification you wish to enroll in:

- AUR30620 Certificate III in Light Vehicle Mechanical Technology
- AUR40216 Certificate IV in Automotive Mechanical Diagnosis
- AUR50216 Diploma of Automotive Technology
- AUR30320 Certificate III in Automotive Electrical Technology
- AUR40620 Certificate IV in Automotive Electrical Technology
- AUR31120 Certificate III in Heavy Commercial Vehicle Mechanical Technology
- AUR50116 Diploma of Automotive Management
- UEE60220 Advanced Diploma of Electronics and Communications Engineering
- BSB50120 Diploma of Business
- BSB60120 Advance Diploma of Business

**Language and cultural diversity**

Are you of aboriginal or Torres Strait Islander origin?  No  
 (For persons of both Aboriginal AND Torres Strait Islander origin, mark both "Yes" boxes)  Yes  
 Yes, Torres Strait Islander

Were you born in Australia?  Yes  No

If yes, Town/City:

If no, please specify county: \_\_\_\_\_ Town/City of Birth: \_\_\_\_\_

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 12 months?  
 Yes  No

**\*If yes please attach a certified copy of your results\***

**Visa Information**

- Have you visited Australia before?  Yes  No
- Have you breached any visa conditions?  Yes  No
- Have you ever been refused a visa from 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**

Please attach a copy of your visa to this application if already approved



**Disabilities**

Do you consider that you have a disability, impairment or long-term condition? *(You may indicate more than one area)*

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

**Schooling**

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

In which year did you complete school?

Are you still attending secondary school? Yes  No

**Previous achieved qualifications**

Have you successfully completed any of the following qualifications?

- Yes  No
- Bachelor Degree or Higher Degree
  - Advanced Diploma or Associate Degree
  - Diploma (or Associate Diploma)
  - Certificate IV (or Advanced Cert/Technician)
  - Certificate III (or Trade certificate)
  - Certificate II
  - Certificate I
  - Certificates other than the above

**Employment Details**

Business Name:

Contact Name:

Address:

Town/Suburb:

Phone:

**Employment**

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

*(Tick ONE box only)*

- Full-time employee
- Part-time employee
- Self-employed-not employing others
- Employer
- Employed- unpaid worker
- Unemployed-seeking fulltime work
- Unemployed-seeking part time work
- Not employed-not seeking

**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 authorize Swann College to apply for my USI number on my behalf.

Please supply a copy of your driver's license for USI ID.



**Study Reason**

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 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                       |

**Student Checklist**

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

- Passport
- English Language Test/Results
- Schooling Certificates
- Resume
- Health Insurance
- Unique Student Identifier (USI)

**Student Declaration**

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

I agree to pay the full course fee (including material fee) by the completion of my course for \_\_\_\_\_ of \$

Student Sign: \_\_\_\_\_

Date: \_\_\_\_\_

**Agent Declaration**

Agents name: \_\_\_\_\_

Agents business name: \_\_\_\_\_

Postal address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

**-see next page**



1. I have assessed the applicant as a genuine temporary entrant and a genuine student as defined by the Department of Immigration and Border Protection at [www.homeaffairs.gov.au/](http://www.homeaffairs.gov.au/)
2. To my best knowledge, the applicant is genuine in making this application and has every intention of completing all programs listed in the application.
3. I have made every effort to verify the authenticity and validity of the documentation attached and related to this application. I am satisfied that the applicant has genuine access to the total funds required while in Australia to cover all costs for the duration.
4. I recommend the College proceed with the assessment for admission of this applicant.
5. I confirm that the student has signed this application form.
6. I have provided the student's personal email address and residential address.
7. I declare that I will forward all correspondence as applicable to this application to the student.

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

Agents Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Office Use Only**

Application submitted  Yes  No

Application accepted  Yes  No

Accepted by: \_\_\_\_\_

Sign

Date

Rejected by: \_\_\_\_\_

The reason for rejecting this application (if rejected):

Sign: \_\_\_\_\_

Date: \_\_\_\_\_

Information entered into SMS:  Yes Date: \_\_\_\_\_

Administrator sign: \_\_\_\_\_ Date: \_\_\_\_\_