

ELICOS Program					
English for Academic Purposes		Term 1  Term 2  Term 3  Term 4  Number of weeks:  Desired Start Date:			
Qualification Selection					
ICT20115 Certificate II in Information, Digital					
Media & Technology					
BSB30115 Certificate III in Business					
BSB31015 Certificate III in Business					
Administration (Legal) BSB31115 Certificate III in Business					
Administration (Medical)					
BSB30315 Certificate III in Micro Business					
Operations					
BSB30915 Certificate III in Business	_				
Administration (Education)					
ICT30118 Certificate III in Information, Digital					
Media and Technology					
BSB40215 Certificate IV in Business		Term 1  Term 2  Term 3  Term 4			
22334VIC Certificate IV in Cyber Security					
BSB50215 Diploma of Business					
ICT50118 Diploma of Information Technology					
BSB60215 Advanced Diploma of Business					
10657NAT Graduate Diploma of Teaching					
English to Speakers of Other Languages	Ш				
10597NAT Graduate Diploma of Financial					
Planning and Advice					
BSB80615 Graduate Diploma of Management					
(Learning)					
ICT80415 Graduate Diploma of Telecommunications Network Engineering					
	in financia	al planning /advice or attach a comprehensive CV			
*Please describe your professional experience in financial planning /advice or attach a comprehensive CV  *Previous studies and professional development undertaken					
Package Offer Program					
Pathway Bachelor's Degree		Diploma of Business - packaged with Bachelor of Business with Adelaide Institute of Higher Education  *please follow the below link for AIHE's online application: AIHE Application Form			





Personal Details			
Family Name			
Given Name			
Title (tick box)	Mr □ Mrs □ Ms □ Miss □ Other		
Gender (tick box)	M D F D		
Date of Birth (DD/MM/YYYY)			
Citizenship	Country of Birth		
Passport Number			
Applicant's Address in Home			
Country			
Country	Postcode / ZIP		
Telephone Number	Mobile Number		
Email			
Applicant Address in Australia			
Applicant / taaress in / tastralia			
Country	Postcode / ZIP		
Telephone Number	Mobile Number		
Email			
Parent/Guardian Details			
Family Name	Given Name		
Parent / Guardian Address			
(If Applicant is under 18 years of age)	State		
Country	Postcode / ZIP		
Telephone Number	Fax		
Mobile Number	Email		
<b>Emergency Contact Detail</b>	S		
Family Name	Given Name		
Address			
	State		
Country	Postcode / ZIP		
Telephone Number	Fax		
Mobile Number	Email		



Agency Contact Details					
Agency Name					
Address					
		State			
Country		Postcode / ZIP			
Telephone Number		Fax			
Mobile Number		Email			
Disability					
Do you have a disability that	Vec D Ne D				
requires special consideration	Yes □ No □				
If yes, please explain					
Student Health Cover					
Do you wish AIBT to arrange	V. E. N. E.				
OSHC for you	Yes □ No □				
Education Qualification	Education Qualification				
Name of School					
Country					
Highest Level completed					
Award Received					
Are Certified Copies of your	Vac D No D				
Academic Record Attached	Yes □ No □				
Name of School					
Country					
Highest Level completed					
Award Received					
Are Certified Copies of your	Vec D No D				
Academic Record Attached	Yes □ No □				
Credit Transfer					
Recognition of Prior Learning	Yes □ No □				
(RPL)	163 🗀 140 🗀				
Accommodation					
Do you want accommodation	Yes □ No □				
arranged for you	100 11 110 11				
If yes, what sort of	Homestay □ International Student Residence □				
accommodation					
(Extra charge occurs)	mornational otadont (tooldonoo 🖻				



Unique Student Identifier				
From 1 January 2015, AIBT can be prevented from issuing you with a nationally recognised VET qualification or statement of attainment when you complete your course if you do not have a Unique Student Identifier (USI). If you have not yet obtained a USI you can apply for it directly at http://www.usi.gov.au/create-your-USI/ on a computer or mobile device.	Enter your Unique Student identifier (if you already have one)			
□ I have read and I consent to the collection, use and disclosure of my personal information pursuant to the information detailed at http://www.usi.gov.au/Training-Organisations/Pages/Privacy-Notice.aspx				
☐ I understand that I may receive a National Centre for Vocational Education Research (NCVER) student				
survey.				
Authorisation				
<ul> <li>Authorise AIBT Pty Ltd to collect, store and use my personal information within the limitations of the Privacy Principle contained in the Privacy Act 1998.</li> <li>Authorise AIBT Pty Ltd to make relevant enquiries where necessary and in accordance with legislation regarding my academic qualifications and any work experience related to my application for undertaking a course of study.</li> <li>Understand that my information will only be released to third parties in accordance with legislation.</li> <li>Understand that I may at any time revoke my authorisation for AIBT Pty Ltd to release my information to third parties by notifying AIBT Pty Ltd and that implementation cannot be retrospective.</li> <li>I have read and understand the Student Handbook.</li> <li>I agree to abide the terms and conditions as set out in the Student Handbook.</li> </ul>				
Parent / Guardian Signature (as identified in this form) If applicant is under 18 years of age	Date			
Office Use Only (this section is only to be comp	pleted by AIBT)			
Student ID:				
Student Accepted Offer:	Yes □ No □			
Commencement Date:				
Competency Completion Details Entered by:	Date			