



AUSTRALIAN BUSINESS AND CULINARY INSTITUTE
RTO: 45461 CRICOS: 03742D
INTERNATIONAL STUDENT APPLICATION FORM

Instructions: Please complete this form and return to your agent or ABCI at the addresses listed below. Please note: All sections marked with an asterisk * must be completed.

Application details*

To submit your application, please forward this form and your supporting documents to admissions@abcinstitute.edu.au

For help with your enrolment form, or if you require any further information, please contact our admissions team at Australian Business & Culinary Institute:

Mobile: +61 410 510 421 or +61 480 122 851

Email: admissions@abcinstitute.edu.au

Personal Information * (Student to complete)

Title: Mr / Ms / Mrs / Miss (please circle)

First Name:

Middle Name:

Family Name:

Gender: Male Female Other

Date of Birth (dd/mm/yyyy): / /

Telephone / Mobile:

Email:

Country of Birth: Australia Other Please Specify:

Are you Aboriginal or Torres Strait Islander origin? (If persons are both Aboriginal and Torres Strait Islander, mark both 'Yes' boxes)

No Yes, Aboriginal Yes, Torres Strait Islander

Passport Number:

Expiry Date (dd/mm/yyyy): / /

Country of Issue:

Nationality: _____

Where are you applying from? Onshore (Australia) Offshore (overseas) Which country? _____

Which campus are you applying for? Adelaide Melbourne

Visa Type: International Student Working Holiday Tourist None

Expiry Date: / /

Current Address: (Please Note- Students cannot list a PO Box address as main address)

Building/Property name:

Unit or street number:

Street Name:		Suburb:		ZIP/Postcode:	
State / Province:			Country:		
Postal Address: <input type="checkbox"/> Tick if same as above					
Address:					
Suburb:			Postcode:		
Emergency contact *					
Name:			Relationship:		
Address:			Email:		
Country:			Phone / Mobile:		
Unique Student Identifier (USI) *					
Do you have a Unique Student Identifier? (USI) <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, please provide your USI _____		
<p>If yes, do you give ABCI permission to use your USI to update your results on the national register? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If no, do you give ABCI permission to create a USI for you? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>					
Language *					
Do you speak a Language other than English at home?: <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, please specify:		
How well do you Speak English?: <input type="checkbox"/> Very Well <input type="checkbox"/> Well <input type="checkbox"/> Not Well <input type="checkbox"/> Not at all					
Have you sat an English language proficiency test in the last TWO YEARS? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If yes, which type was your test?: <input type="checkbox"/> IELTS <input type="checkbox"/> TOEFL <input type="checkbox"/> PTE <input type="checkbox"/> CAE <input type="checkbox"/> OTHER (please specify) _____					
If yes, please provide the result and date of your English language proficiency test below.					
Result:			Date:		
Financial capacity (OFFSHORE APPLICATIONS ONLY)					
Please provide evidence of how you plan to meet your living and studying costs. You must select one of the below options:					
<input type="checkbox"/> Option 1: 12 months living expenses requirements To meet this requirement you must provide evidence that you have access to sufficient funds to cover the costs of: A: Travelling to Australia for you and any other family members travelling with you, and; B: 12 months living expenses, course fees and school fees for any school-aged dependants (5-18yrs). You must include the following when calculating your estimated expenses for 12 months:					

Items	Amount required (AUD)
Tuition fees	Fees for the first 4 study periods
Student/guardian's living expenses	\$24,608.97
Partner/spouse (if applicable)	\$8,613.54
Each child (if applicable)	\$3,688.84 per child
School fees for school aged dependants (5-18yrs)	\$8,296.00 per child
Return airfares for each person travelling	Depending on country of origin
Please indicate the sources of the funds you will be relying on to cover your expenses (tick all that apply)	
Private funding: <input type="checkbox"/> Self <input type="checkbox"/> Loan <input type="checkbox"/> Support from relatives Required evidence: You must provide certified copies of bank statements or loan letters with your application. If you are being supported by relatives, you must also provide a signed letter from your relatives explaining your relationship and evidence of their financial capacity. They should also include proof of relationship documents and photo ID. Scholarship/sponsored student: <input type="checkbox"/> Government sponsor <input type="checkbox"/> Corporate sponsor Required evidence: You must provide a certified copy of a financial guarantee or sponsorship letter detailing the value and conditions of your scholarship with your application.	
<input type="checkbox"/> Option 2: Annual income requirement To meet this requirement you must provide evidence that you or the relative sponsoring your studies have a personal annual income of at least AUD\$62,222.00 for individual students and at least AUD\$72,592.00 for students accompanied by family members. Required evidence: The evidence of annual income must be provided in the form of official government documentation, such as an annual income tax assessment.	
Courses *	

Which course(s) would you like to enroll in?

Tick	Course Code and Name *Kindly note that ABCI delivers all the courses in a face-to-face study environment	Preferred Intake*
<input type="checkbox"/>	ELICOS General English	MM/YYYY
<input type="checkbox"/>	SIT30821 Certificate III in Commercial Cookery	MM/YYYY
<input type="checkbox"/>	SIT40521 Certificate IV in Commercial Cookery	MM/YYYY
<input type="checkbox"/>	SIT50422 Diploma of Hospitality Management	MM/YYYY
<input type="checkbox"/>	SIT60322 Advanced Diploma of Hospitality Management	MM/YYYY
<input type="checkbox"/>	BSB50820 Diploma of Project Management	MM/YYYY
<input type="checkbox"/>	BSB80120 Graduate Diploma of Management (Learning)	MM/YYYY
<input type="checkbox"/>	RII60520 Advanced Diploma of Civil Construction Design	MM/YYYY
<input type="checkbox"/>	ICT60220 Advanced Diploma of Information Technology	MM/YYYY

Schooling *

Are you still attending secondary school? Yes No

What is your highest COMPLETED school level?

- Completed Year 12 or equivalent Completed Year 9 or equivalent
 Completed Year 11 or equivalent Completed Year 8 or Lower
 Completed Year 10 or equivalent Never attended school

Year completed: _____

Where completed: _____

Concurrent study *

Are you transferring from another education provider? Yes No

Please note: If you are transferring from your principal course before completing 6 months of study, you must obtain a letter of release from your principal course provider.

Previous qualifications *

Have you SUCCESSFULLY completed any of the qualifications listed below? Yes No

If yes, please indicate below.

Qualification Level	Recognition		
	Australian Qualification	Australian Equivalent	International
<input type="checkbox"/> Bachelor Degree or Higher Degree			
<input type="checkbox"/> Advanced Diploma or Associate Degree			
<input type="checkbox"/> Diploma			
<input type="checkbox"/> Certificate IV			
<input type="checkbox"/> Certificate III			
<input type="checkbox"/> Certificate II			
<input type="checkbox"/> Certificate I			
<input type="checkbox"/> Miscellaneous Education			

Note: Please attach the relevant documents along with your application form. These include:

- Certified copies of certificates in English or translated to English
- Certified copies of academic transcripts with grading explanations in English or translated to English.

Disability *

Do you consider yourself to have a disability, impairment or long-term condition? Yes No

If yes, please indicate the areas of disability, impairment or long-term condition. (You may indicate more than one area)

- Hearing/Deaf Learning Vision Physical Mental Illness Medical Condition
 Intellectual Acquired Brain Impairment Other _____

Employment *

Of the following categories, which BEST describes your current employment status? (Tick ONE box only)

Full-time Employee
 Employed - Unpaid Worker in a Family Business
 Part-time Employee
 Unemployed - Seeking Full-time Work
 Self Employed - Not Employing Others
 Unemployed - Seeking Part-time Work
 Employer
 Not Employed - Not Seeking Employment

Occupation Identifier * (please circle) **Industry of Employment * (Tick ONE box only)**

If Working or Self-employed please tick the field:

<p>If Working or Self-employed please circle which area:</p> <ol style="list-style-type: none"> 1. Manager 2. Professionals 3. Technicians and Trade Workers 4. Community and Personal Service Workers 5. Clerical and Administrative Workers 6. Sales Workers 7. Machinery Operators and Drivers 8. Labourer 9. Others 	<input type="checkbox"/> Agriculture, Forestry and Fishing <input type="checkbox"/> Mining <input type="checkbox"/> Manufacturing <input type="checkbox"/> Electricity, Gas, Water and Waste Services <input type="checkbox"/> Construction <input type="checkbox"/> Wholesale Trade <input type="checkbox"/> Retail Trade <input type="checkbox"/> Accommodation and Feed Services <input type="checkbox"/> Transport, Postal and Warehousing	<input type="checkbox"/> Information, Media and Telecommunication <input type="checkbox"/> Financial and Insurance Service <input type="checkbox"/> Rental, Hiring and Real Estate Services <input type="checkbox"/> Professional, Scientific and Technical Services <input type="checkbox"/> Administrative and Support Services <input type="checkbox"/> Public Administration and Safety <input type="checkbox"/> Education and Training <input type="checkbox"/> Health Care and Social Assistance <input type="checkbox"/> Arts and recreation Services <input type="checkbox"/> Other Services
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Study Reason *

Which best describes your reason for undertaking this course? (Tick ONE box only)

To get a job
 To get a better job or promotion
 For personal interest or self-development
 To develop my existing business
 It was a requirement of my job
 To try for a different career
 To start my own business
 I wanted extra skills for my job
 To get into another course of study
 Other reasons (please specify):

How did you hear about us? *

Please tell us how you discovered ABCI.

Friends or family
 Cinema advertisement
 Migration agent
 Current student
 Internet
 Google search
 Social media (Facebook/Instagram)
 Flyer
 Other (please specify):

Declaration & Privacy Statement*

1. I declare that the information I have provided is true and correct. I am aware of the consequences that may arise from providing false, misleading or incomplete information, including the cancellation of my enrolment, or the withdrawal of any offer made by Australian Business & Culinary Institute.
2. I understand that the Australian Business & Culinary Institute is required to submit data sourced from this enrolment form to the national VET administrative collection as a regulatory reporting requirement. The information contained on my enrolment form may be used by my RTO or the following third parties for administrative, regulatory and/or research purposes:
 - School - if I am a school-based apprentice or trainee or VET in Schools student.
 - Employer - if I am enrolled in training paid by my employer.
 - Government departments and agencies and authorised VET-related bodies.
 - VET regulators.
3. I have read and understood Australian Business & Culinary Institute's Policies and Procedures and/or relevant information contained on Australian Business & Culinary Institute's website.
4. I understand that the Australian Business & Culinary Institute reserves the right to discontinue or alter any course, subject, unit of competency, fee, admission requirement, staffing or another arrangement without prior notice. Australian Business & Culinary Institute reserves the right to cancel or not offer a programme. If any programme is cancelled or not offered, Australian Business & Culinary Institute will refund all tuition fees in accordance with the provision of Sections 27 and 29 of the Education Services for Overseas Students Act 2000. This agreement does not remove the right to take action under Australia's consumer protection laws.
5. I understand that all personal information collected by Australian Business & Culinary Institute is confidential and may be made available for the relevant Commonwealth and State agencies, and the Fund Manager of the ESOS Assurance Fund. This information includes personal and contact details, course enrolment details and changes, and the circumstance of any suspected breach by the student of the visa condition.
6. **Visa Entitlement Verification Online (VEVO) Authorisation:** I authorize Australian Business & Culinary Institute to use my personal information to access the VEVO for my enrolment and during my course at Australian Business & Culinary Institute to determine my Australian Visa status and Visa conditions that apply to my visa.
7. **Unique Student Identifier (USI):** I understand that it is my responsibility to provide Australian Business & Culinary Institute with USI prior to the course commencement. I authorise Australian Business & Culinary Institute to process one-on-one transactions for functions such as; collecting, verifying or viewing my 'Unique Student Identifier'. For any difficulties in creating USI, please contact CADET for guidance. For more information on USI, please visit: <http://www.industry.gov.au/skills/RegulationReformsAndInitiatives/UniqueStudentIdentifierForVET/Pages/InformationForTrainingProviders.aspx>

BEFORE SUBMITTING THIS FORM:

- 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.
- I declare that the information I have provided is true and correct. By signing my name below, I declare that I have read the terms and conditions above and abide by them in full.

Signature (Applicant): _____ Student Name: _____ Date: DD /MM/YYYY

All applicants must be over 18 years of age. (Note: parental consent is required if the student is under the age of 18)

Submission*

Please return this Application Form to Australian Business & Culinary Institute, along with the following documentation:

- Completed application form
- A copy of principal course release letter (if applicable)
- A copy of your Overseas Health Cover
- A copy of your passport
- A copy of your visa (if applicable)
- Evidence of your financial capacity (if applicable)
- Evidence of your English language proficiency test (e.g. IELTS)
- Any previous COEs
- A copy of your schooling records (Year 12 or equivalent with grading explanation and translation if not in English)
- A copy of any previous qualifications (academic transcripts and certificates with grading explanation and translation if not in English)
- Please keep a copy of this form yourself for reference.

OFFICE USE ONLY:

Admission Officer's Name: _____

Admission Office's Signature: _____

Date: _____