

HOW TO APPLY

- Print this form and complete it as a hard copy.
- Send the completed form to Study Options, 83 Alma Road, Clifton, Bristol, BS8 2DP, with your supporting documents.

Supporting documents required for application:

- 1. A photocopy of the personal details page of your passport
- 2. Original certificates for your school (and any other) academic qualifications, for example, GCSE, A Level, BTEC Diploma
- 3. Original certificates for any professional qualifications you would like included in the assessment
- 4. A copy of your CV

Application fees

Study Options can waive applications fees for qualified candidates, so please do not enter any payment or card details on this form.

Application notes

- 1. If any further material or documents are required for your application, Study Options will be in touch to request these after we have received and checked your application.
- All academic documents must be submitted as originals, we can't accept
 photocopies. We'll make certified copies to send with your application, and will return
 the originals by recorded delivery. To ensure their safe arrival, please send your
 documents to us by recorded delivery.

If you have any questions or problems making your application please contact a student advisor at Study Options on 020 7353 7200 or mail@studyoptions.com



AGENT'S STAMP (in English including address, phone)

STUDY OPTIONS LTD 83 ALMA ROAD, CLIFTON BRISTOL, BS8 2DP +44 117 911 5610 MAIL@STUDYOPTIONS.COM

Counsellor's name: Stefan Watts

Email address: mail@studyoptions.com

TAFE WESTERN AUSTRALIA



PART A: APPLICANT DETAILS

| 1. Personal Details: | | | | | |
|----------------------|------------------------------------------------------|---------------------------------------------------------------|--|--|--|
| | | PORT. Please use BLOCK LETTERS. All fields must be completed. | | | |
| Name: | | Date of birth (DD/MM/YY): Gender (Male/Female) | | | |
| | | Given names: | | | |
| | Preferred name: | Email address: | | | |
| 2. Home Country | | | | | |
| Address: | Number and Street: | | | | |
| | Suburb/City: Postcod | e: Country: | | | |
| | Telephone (country code/area code/number) | Mobile: | | | |
| 3. Local Address in | | | | | |
| Western Australia: | Number and street: | | | | |
| (If known) | Suburb: | Post code: | | | |
| | Telephone: | Mobile: | | | |
| 4. Emergency | | | | | |
| Contact: | Name of Emergency Contact: | | | | |
| | Relationship (husband, sister, mother etc): | | | | |
| | Telephone number (include country and area codes): | | | | |
| 5. Parent/Guardian | | | | | |
| Details: | IF YOU ARE UNDER 18 YEARS OF AGE, PLEASE COM | PLETE THE FOLLOWING: | | | |
| | Parent/Guardian's Full Name: | | | | |
| | Number & Street: | | | | |
| | Suburb/City: | Country: | | | |
| | Telephone (country code/area code/number): | | | | |
| | Mobile phone number: | Email address: | | | |
| 6. Passport & Visa | | | | | |
| Details: | Country of Birth: | Country of citizenship: (as shown on passport): | | | |
| | Passport no: | Expiry date: | | | |
| | Do you hold a current Australian Visa? | □ No Visa expiry date: | | | |
| | If Yes, what type of visa do you hold? | If No what type of visa will you be applying for? | | | |
| | In which country will you be applying for your Visa? | | | | |
| | Have you studied in Australia previously? ☐ Ye | s 🗆 No If Yes, Institute: | | | |

| | Are you currently enrolle | Are you currently enrolled at another College/University in Australia? 🗌 Yes 🗎 No | | | | |
|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|---------------|----------------------------------------------------------------------|--|--|
| | Have you been at this institution longer than 6 months? ☐ Yes ☐ No If No, you must provide a release letter. | | | | | |
| | Have you applied for Aus | tralian permanent residency | status? 🗆 | Yes 🗆 No If Yes Date of application: | | |
| | - | ralian permanent residency at any s | tage during t | the application process, you need to advise ETI immediately. | | |
| 7. Overseas Student Health Cover | | rseas Student Health Cover? | П гаУ П | No | | |
| (OSHC): | | er?: | | | | |
| | | | | | | |
| | | or Single cover? Single [| | | | |
| 8. English Level: | | | | | | |
| | COMPLETE THE FOLLOWIN | G AND PROVIDE EVIDENCE WI | TH YOUR A | APPLICATION. | | |
| | ☐ English is my first lang | □ English is my first language. | | | | |
| | \square English was the langua | ge of instruction during my sec | ondary sch | nool or college studies and I gained a satisfactory pass in English. | | |
| | \square I have undertaken an | English Course. | | | | |
| | Course name: | Englis | h College: | Level of English Course: | | |
| | ☐ I have undertaken an | ELTS test Date: | | Overall Band Score: | | |
| | Band scores: Listening | : Readir | g: | Writing:Speaking: | | |
| | ☐ I have undertaken a TOEFL test. Date: | | | | | |
| | ☐ I have undertaken a Po | earson test. Date: | | Score: | | |
| 9. Equity and | | | | | | |
| Disability: | THE INFORMATION BELOW IS USED TO ASSIST IN MONITORING, SUPPORTING AND IMPROVING SERVICES TO STUDENTS WITH MEDICAL/DISABILITY REQUIREMENTS. | | | | | |
| | Do you have a disability, impairment or long-term medical condition which may affect your studies? \square Yes \square No | | | | | |
| | Please indicate the type/s of disability | | | | | |
| | \square Hearing \square Vision \square Learning \square Medical \square Mobility \square Other | | | | | |
| | Would you like to receive information on support services, equipment and facilities available that may assist you? 🗆 Yes 🗀 No | | | | | |
| | Please give brief details about your condition/disability | | | | | |
| | | | | | | |
| 10. Previous | | | | | | |
| Studies: | A certified copy of original transcripts of all official results must accompany this application. Please include grading system to enable interpretation of academic results. List any studies you have attempted, whether complete or incomplete. | | | | | |
| Secondary school st | · | | | | | |
| Month/year commenc | ed Month/year completed | Year Level Achieved | | Name and country of school | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Tertiary or post seco | ondary studies | | | | | |
| Month/year commenc | ed Month/year completed | Title of course | | Name and country of Institution | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| 1. English Course: | | | | | | |
|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|--------------------------------------------------|-----------------------|--|--|
| | Do you intend to undertake English language studies? | | | | | |
| | | | us: | | | |
| | Number of weeks: 🗆 5 🗆 10 | 0 🗆 15 🗆 20 🗆 25 🗆 30 🗆 40 [| ☐ 50 ☐ Other: | | | |
| 2. TAFE Course: | | | | | | |
| | Please Complete details of the T | TAFE course you want to enrol into: | | | | |
| | | | | | | |
| | | Semester: □ 1 (February) OR Semeste | Campus: | | | |
| | | | | | | |
| PART C: TAFE | TO UNIVERSITY PACKAG | E (UNDER STREAMLINE VISA PROCE | SSING ARRANGEMENTS) | | | |
| | | olication with a University Degree? | | | | |
| | If Yes, which University would yo | ou like to package with? Curtin 🗌 EC | U 🗀 Murdoch 🗀 | | | |
| 1. Course Pathway: | | | | | | |
| | • | TAFE and corresponding University cours on the University packaging page. | se you want to package. Details of available pat | hways can be found on | | |
| | Course number | Course name | Institute | Campus | | |
| TAFE Course: | | | | | | |
| University Course: | | | | | | |
| | Lam applying for admission in | Samester: 1 (February) OR Sames | ter 7 (July) Vear 20 | | | |
| | I am applying for admission in Semester: ☐ 1 (February) OR Semester ☐ 2 (July) Year 20 To apply for a university package, please go to www.eti.edu.au/universitypackaging for further information, fees and university application forms | | | | | |
| | | -, F 0 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| PART D: FINA | LISING YOUR APPLICATION | NC | | | | |
| 1. Application | | | | | | |
| Checklist: | YOU MUST ATTACH CERTIFIED COPIES OF AWARD CERTIFICATES AND FULL ACADEMIC TRANSCRIPTS, INCLUDING KEYS TO THE GRADING SYSTEM USED. ALL DOCUMENTS MUST BE IN ENGLISH; IF NOT, PLEASE INCLUDE CERTIFIED ENGLISH TRANSLATIONS. | | | | | |
| | Have you: | | | | | |
| | ☐ Completed all sections of the Application form | | | | | |
| | Attached certified copies of all academic qualifications (including secondary school) | | | | | |
| | ☐ Attached certified copies of your English language proficiency ☐ Attached a certified copy of your passport (if available) | | | | | |
| | (see part C for datails) | | | | | |
| | Attached the University application forms you must complete if you are applying for a packaged program (see part C for details) | | | | | |
| | NOTE: IF YOU ARE UNDER 18 THIS DECLARATION MUST ALSO BE SIGNED BY YOUR PARENT OR GUARDIAN. I declare the information in this application and supporting documentation is true. I acknowledge that the provision of incorrect information or documentation or the withholding of information or documentation relating to my application may result in cancellation of my enrolment. I consent that my personal information may be made available to Australian Commonwealth and State agencies including DIAC pursuant to obligations under the ESOS Act and the National Code. | | | | | |
| 2. Declaration & | | | | | | |
| Agreement: | Applicant's Signature: | | Date: | | | |
| | Parent/Guardian's Signature (If student is under 18) | 2: | Date: | | | |

OFFERS:

Please note that the notification of the outcome of this application, will be sent to you and your agent (if applicable); at the email address listed in Part A of this form. It is important that you supply a current email address so that we are able to keep in contact with you throughout the application process.

ETI CONTACT DETAILS:

Education and Training International: Ground floor, 123 Adelaide Terrace, East Perth Western Australia 6004 Postal address: PO Box 6830, East Perth BC Western Australia 6892 Tel (+61 8) 9218 2100 (press 2) Email: admissions.eti@dtwd.wa.gov.au Web: www.eti.wa.edu.au

STUDY OPTIONS LTD 83 ALMA ROAD, CLIFTON BRISTOL, BS8 2DP +44 117 911 5610 MAIL@STUDYOPTIONS.COM



STUDENT DECLARATION

| Name: | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-----------------|---------------|-----------------|-----------|
| Date of birth: | | N | ationality: | | |
| | | | | | |
| Mobile: | | L | andline: | | |
| Email: | | | | | |
| | | | | | |
| Who will fund yo | ur tuition fees and | d living costs | ? Please give | e further detai | Is below: |
| | | | | | |
| | | | | | |
| DI : 1 | | | | | |
| Please circle yo | ur answers: een refused a visa | a for Australia | or another o | ountry? | Yes / No |
| Do vou have any | health issues tha | at mav affect v | our applicat | ion for a | Yes / No |
| student visa? | | , | | | 1.667116 |
| Will you have an | Will you have any family members joining you? If so please state name, Yes / No | | | | |
| age and relations | ship to you in the | box below. | | | |
| | | | | | |
| | | | | | |
| I declare that I have read and understand the information relating to the cost of living in Australia at: https://immi.homeaffairs.gov.au/visas/web-evidentiary-tool and I have access to sufficient funds to cover all associated costs with my study, travel to and from Australia, living expenses for the duration of my studies for myself and my family members (if applicable) for the total period of my stay in Australia. | | | | | |
| I understand that the tuition fees do not include expenses such as textbooks, stationery and additional programme specific requirements. | | | | | |
| I understand that in the event that I have insufficient funds to cover all associated study and living costs, I will not seek assistance from the College or the Australian government. | | | | | |
| I understand that in the event that I have insufficient funds to cover all associated study and living costs, the College reserves the rights to terminate my enrolment and eCoE. | | | | | |
| I hereby certify that all the statements made on this declaration of finances are true and correct. | | | | | |
| Student signature: | | | | | |
| Name: | Name: | | | | |
| Date: | | | | | |
| | DI (() | <u> </u> | *** | | |

Please return this declaration with your application form(s)