APPLICATION TO STUDY FORM

International

How to Complete this Form

- Please write clearly in black ink using capital letters in English.
- Include one set of supporting documents with this application including certified English translation copies where required.
- All supporting documents for this application must be certified as true copies of originals. Kindly refer to the following link https://immi.homeaffairs.gov.au/help-support/applying-on-line-or-on-paper/on-paper/certified-copy for more details.
- Ensure that you sign the declaration in the end of this form.
- Please note that delays may occur in the processing of this application if the application is incomplete.



www.scei.edu.au CRICOS Provider Code: 02934D RTO Provider Number: 121952 ABN: 56 121 182 027

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Term (I	ntake) : Mo	onth		Year :		Car	mpus :	MEL	ADL
Select	CRICOS Code	NTIS Code		Course Title		Duration	Tuition Fee	Work placement Fee	Material Fee
	104035B	BSB50820	Diploma of Pr	oject Management		52 WEEKS	\$12,000.00	N/A	\$350.00
	104439D	BSB60720	Advanced Dip	oloma of Program Manageme	ent	52 WEEKS	\$12,000.00	N/A	\$350.00
	090551A	CHC33015	Certificate III i	n Individual Support		44 WEEKS	\$6,000.00	N/A	\$250.00
	090552M	CHC43015	Certificate IV	in Ageing Support		60 WEEKS	\$9,000.00	N/A	\$250.00
	090557F	CHC43115	Certificate IV	in Disability		56 WEEKS	\$9,000.00	N/A	\$250.00
	090553K	CHC52015	Diploma of Co	ommunity Services		104 WEEKS	\$20,000.00	\$500.00	\$350.00
	090595M	CHC62015	Advanced Dip	loma of Community Sector I	Management	66 WEEKS	\$10,000.00	\$500.00	\$350.00
	082212J	CHC30113	Certificate III i	n Early Childhood Educatior	and Care	46 WEEKS	\$10,000.00	N/A	\$250.00
	082213G	CHC50113	Diploma of Ea	arly Childhood Education and	d Care	104 WEEKS	\$20,000.00	N/A	\$250.00
	090550B	HLT37215	Certificate III i	n Pathology Collection		32 WEEKS	\$7,000.00	\$500.00	\$500.00
	090556G	HLT52015	Diploma of Re	emedial Massage		77 WEEKS	\$12,000.00	N/A	\$500.00
	092297E	HLT54115	Diploma of Nu	ursing		80 WEEKS	\$24,000.00	\$4,500.00	\$1,200.00

Note: Application Fee \$250 and Overseas Student Health Cover (OSHC) are not included in the Tuition fee.

(B) PERSONAL DETAILS (AS SHOWN IN PASSPORT) Title: Gender: Male Female Rather not answer Other Given Name(s): Last Name: Date of Birth (dd/mm/yyyy): Country of Birth: Nationality: First Language: Passport Number: Expiry Date (dd/mm/yyyy):

(C) CONTACT DETAILS				
Address (Home Country) :				
City:	Country :		Postcode :	
Address (if in Australia) :				
Suburb :	State :		Postcode :	
Phone Number :		Mobile :		
Email Address :				
(D) EMERCENCY CONTACT RETAILS				
(D) EMERGENCY CONTACT DETAILS				
Name :				
Number :	Relationship :		Postcode :	
In Case of an Emergency: In the event of circumstan authorised as a matter of urgency to seek and provide			incapable of speaking on the	neir own behalf, SCEI is
(E) OVERSEAS STUDENT HEALTH COVER	P (OSHC) DETAILS			
Do you already have OSHC? If Yes then p				
-	lease provide details.	To a constant		F!
Provider's Name :		Type: Sing	•	Family
Membership Number :		Expiry Date (dd/mn		
Do you want SCEI to arrange OSHC for you	ou? If yes then please p	rovide details : (No	te: SCEI will arrange	NIB OSHC only)
Type: Single Couple	Family			
(F) DISABILITY SUPPORT				
Do you have a disability, impairment or pe	rmanent medical condi	tion that can affect y	your studies?	Yes No
Hearing / Deaf Physical	Intellectu	ial Ment	al illness	
Vision Medical cond	ition Learning	Acqu	ired brain impairmen	t
Other Medical Conditions, please specify	:			
(G) EDUCATION DETAILS				
Schooling				
What is your highest COMPLETED school of you are currently enrolled in secondary eactually completed and not the level you a	education, the Highest s	school level complet	ted refers to the highe	est school level you have
Year 12	Year 10		Year 8 c	or lower
Year 11	Year 9 or	equivalent	Never a	ttended school
Year completed				
Are you still enrolled in secondary or senio	or secondary education?	Yes N	No	

Previous qualifications achieved

Have you SUCCESSFULLY completed any of the qualifications in Australia?

Yes No

If YES Please provide details of your qualifications. Highest Level (Select one only)

Select	Course	Α	Е	ı	Note:
	Bachelor Degree of Higher Degree				If you have multiple Prior Education Achievement
	Advanced Diploma or Associate Degree				Recognition Identifiers for
	Diploma (or Associate Diploma)				any other qualifications, use the following priority
	Certificate IV (or Advanced Certificate/Technician)				order to determine which identifier to use:
	Certificate III (or Trade Certificate)				
	Certificate II				A - Australia E - Australia Equivalent
	Certificate I				I - International
	Certificates other than the above				

Do you wish to apply for Credit Transfer?	No		If yes your Application must include a completed Credit Transfer Application Form available from SCEI Websitte: scei.edu.au
Do you wish to apply for RPL?	No		If yes please download the RPL Policy and Application Form from SCEI Websitte: scei.edu.au and contact us for your relevant RPL Kit.
Are you currently studying with another provider?	Date cor	nmenc	ed (dd/mm/yyyy):

(H) ENGLISH PROFICIENCY

Please provide details of any English test / Course taken :

IELTS Academic PTE Academic OET TOEFL iBT ®

Reading	g Score	Writing Score	Speaking Score	Listening Score	Overall Score	Date Achieved
ELICOS	Course	Name :			Date Complete	ed :

Other Please Specify:

(H.1) Diploma of Nursing Applicants ONLY

Please read the NMBA English language skills registration standard to assist you to understand the requirements and then tick the box that applies to you:

English is your primary language and you have completed at least six years of primary and secondary education taught and assessed in English in any of the recognised countries, and includes at least two years between grades 7 and 12.

English is not your primary language but you achieve the required minimum scores as specified in the NMBA English language registration standard.

IELTS Academic PTE Academic OET TOEFL iBT [®]

Reading Score	Writing Score	Speaking Score	Listening Score	Overall Score	Date Achieved

NMBA English language skills registration standard Information:

All applicants who do not have English as their primary language need to provide English Language test score results showing:

- a) an IELTS (academic module) with a minimum overall score of 7 and a minimum score of 7 in each of the four components (listening, reading, writing and speaking). OR b) an OET with a minimum score of B in each of the four components (listening, reading, writing and speaking). OR
- c) a PTE Academic with a minimum overall score of 65 and a minimum score of 65 in each of the four communicative skills (listening, reading, writing and speaking). OR
- d) a TOEFL iBT with a minimum total score of 94 and the following minimum score in each section of the test:
 - 24 for listening,
 - 24 for reading,
 - · 27 for writing, and
 - 23 for speaking.

14-16 Grote Street Adelaide SA 5000 Telephone +61 8 8212 8745

(I) VISA DETAILS				
Do you currently hold	any type of Austra	lian Visa?		
Yes (provide deta	ails below)	No		
Visa Type :		Subclass :		Expiry Date (dd/mm/yyyy):
What type of student	visa application wil	I you submit to Depa	artment of Home Affairs (DHA	A)?
Single	Couple F	amily		
DHA office where App	olication is lodged (or will be lodged)		
Country:			City:	
Visa Application Dat	e (Or intended if k	nown) :		
Have you ever or any	other person invol	ved in the visa appli	cation ever been convicted o	f a criminal offence?
No	Yes (provide a sta	atement to explain)		
Have you ever or any countries before?	other person invol	ved in the visa appli	cation had any visa refused o	or cancelled in Australia or any other
No	Yes (provide a sta	itement to explain)	Where :	
(J) HOW DID YOU HE	AR AROUT SOUTH	IERN CROSS EDITO	ATION INSTIITE?	
	LAITABOOT GOOTI			
Agent		· ·	m / LinkedIn / Google+	Google Search
Exhibitions			udents. Provide ID Please:	
Facebook Events			aff. Provide Name Please: per / Magazine	Radio
Lvents		Newspa	pei / iviagazine	Maulo
(K) AGENT DETAILS	(If applying throug	h an agent)		
Company Name :				
Agent's Name :				
Email Address :			Contact Number :	
the correct information. I have	assessed the applicant a	s a Genuine Temporary Enti	rant and Genuine Student as defined by	am satisfied that this "Application to Study form" contains the Department of Home Affairs (DHA). I am satisfied led or translated by the agency, the original document has
Agent's / Representat	tive Signature		Agent's Stamp	
(L) PAYMENT PLAN (OPTIONS (Conditio	n apply)		
			r initial deposit has been m	nade.
Please choose one pr		-	F	
Every Month	Eve	ery 2 Months	Every 3 Months	Every 6 Months

(M) ENROLMENT PROCEDURE

1. Enrolment Procedure

Fill out the Application to Study Form provided by SCEI and send it through email to **enroll@scei.edu.au** OR Post to:

- a. Melbourne Campus 155-161 Boundary Road, North Melbourne, VIC, Australia 3051, OR
- b. Adelaide Campus14 Grote Street,Adelaide, SAAustralia 5000

2. Enrolment and Acceptance

SCEI enrolment officer will assess the application to study form and if accepted successfully letter of offer will be issued through email within 5 working days.

3. Payment of Fee

The application will accept the letter of offer and deposit fee in the nominated bank account of SCEI. SCEI will then issue Confirmation of Enrolment (CoE) and send through email.

(N) ATTACHMENT CHECKLIST

Provide all the relevant documents, incomplete applications will cause delays in processing:

Certified evidence of English language proficiency like IELTS, TOEFL, PTE and ELICOS, etc.

Certified documented evidence of Year 12 education or equivalent (with certified translation, if not in English)

Certified documented evidence of other previous qualifications if applicable (with certified translation, if not in English)

Certified copy of Passport

Financial declaration form (if applicable)

Copy of Visa (if applicable)

Evidence of Overseas Health Cover (if applicable)

Copies of Confirmation of Enrolments (if applicable)

Certified copies of documents to be assessed for Credit Transfer and/or Recognition of Prior Learning (RPL) if required

Other

(O) DECLARATION AND AGREEMENT

In signing this Application Form, I agree that I have read and understood the following:

I declare that I have a genuine intention to study the course for which I have applied, and that I have access to sufficient funds to cover tuition fees, living expenses, travel expenses, Overseas Student Health Cover for the duration of my studies and to support my dependants (if coming along with me).

I understand that the application fee accompanying this application to study form is non-refundable.

I acknowledge that any false or misleading statement may result in denial of my admission application or subsequent cancellation of my enrolment at SCEI, which may affect the validity of my visa.

The information on this form is true and correct. This information may be used for monitoring, program planning and statistical purposes.

I declare that I will be solely responsible for meeting the conditions listed on my current student visa and liaise with DHA and my agent (if applicable).

I declare that I have also read the ESOS framework provided by SCEI in Student's Handbook.

Student Signature:		
Data (dd/mm/4)		