



## **Division of Australian English Colleges Pty Ltd**

ABN 72 606 814 019

RTO Code: 45215 CRICOS Provider Code: 03630A G03, 247 King St., Mascot Sydney NSW 2020 Australia

Telephone: +61 2 8073 0728

E-mail: info@bic.edu.au Website: www.bic.edu.au

## **Study Tour Application**

Personal Detail						
Title: MR. MRS. MS.	MISS Gen	der: $\square$ M $\square$ F	DOB: / /	Language:		
Surname:		First Name:				
Address in Australia:			Suburb:		Postcode:	
Mobile: Email:						
Nationality: Pass		Passport No.:		Place of Birth:		
Visa Type: Visa		sa Issue Date:	Issue Date:		sa Expire Date:	
Overseas Address						
Flat/Unit No.: Street/Lot No.:			Street Name:			
Suburb/City/Town:			State/Province:			
Country: Postcod		ode:	Home Phone:			
Parents Detail						
Parent/Guardian 1			Parent/Guardian 2			
First Name:			First Name:			
Surname:			Surname:			
Date of Birth			Date of Birth:			
Nationality:			Nationality:			
Passport No:			Passport No:			
Language:			Language:			
Contact No:			Contact No:			
Address:			Address:			
Allergies						
Does your child have any allergies? NO YES – Please Specified:						
Permission of First Aid and Other Health Products						
Do you give permission to the school for application of First Aid and other Health Products NO YES						
Student/Parents/Guardian to Complete						
Printed Name: Sign			nature:			
Date:						
Office Use ONLY						
			Printed Name: Signature:			
Parent/Guardian Passport						
Completed Form			:			