

STUDENT ENROLMENT FORM

1. Personal Details

Please complete the following information as it appears on your current passport or photographic identification.

Title

First name

Surname or family name

Other given names

Previous name (if applicable)

Date of birth

Male

☐

Female

☐


Please attach a scanned colour copy of identification.
Domestic Students - Passport or Driver Licence & Birth Certificate
International Students - Passport

Note: If applicable provide name change documents.

2. Course Selection

What course are you applying for?

Full course name

Major (if applicable)

Course code (if known)

Select study option (Diploma courses only)

☐

Full-Time

☐

Part-Time

What campus would you like to study at?

☐

Brisbane

☐

Byron Bay

☐

Sydney

☐

Melbourne

☐

Adelaide

☐

Perth

☐

Online

Intake commencement date?

Please provide any relevant experience relating to this course

Brisbane | Byron Bay | Sydney | Melbourne | Adelaide | Perth

- Complete all relevant fields, sign and date.
- Print in BLOCK LETTERS and use either a BLACK or BLUE pen.
- Print X in the appropriate boxes.
- Carefully read and agree to all terms and conditions.
- Attach the following documentation (where required): a scanned colour copy of your photographic identification, proof of citizenship, IELTS test results, High School Certificate results, academic transcripts and proof of course eligibility. Ensure you read the SAE Policies and Procedures at www.sae.edu.au/policies.

3. Contact Information

Phone number (include country and area code if outside Australia)

Mobile number (include country and area code if outside Australia)

Other contact number (include country and area code if outside Australia)

Email address

4. Residential Address

Address

Suburb, Town

State

Country

Postcode / Zip Code

5. Emergency Contact Details

First name

Surname or family name

Relation to applicant

Phone number (include country and area code if outside Australia)

Mobile number (include country and area code if outside Australia)

Email address

I authorise SAE to discuss academic, administrative or welfare matters with the person nominated above.

☐

Yes

☐

No



6. Citizenship and Residency

Were you born in Australia?

☐ Yes

If yes, are you of Aboriginal or Torres Strait Islander origin?

☐ Yes, Australian Aboriginal descent.
 ☐ Yes, Torres Strait Islander descent.

☐ No

What country were you born in?

What year did you or will you arrive in Australia?

Are you an Australian Citizen?

☐ Yes - Go to question 8

☐ No, please indicate your visa status

☐ I hold Permanent Resident status in Australia.
☐ I hold a Permanent Humanitarian visa.
☐ I hold a temporary entry permit for Australia.
☐ I am going to apply for a visa.
☐ I do not require a visa for this study mode.

For what country do you hold primary citizenship?

Which immigration office will you use to apply for your Visa?

7. Language

Do you speak a language other than English at home?

☐ No, English only

☐ Yes

Please specify

8. Study Reason

What best describes your reason for wanting to study?

<input type="checkbox"/> To get a job	<input type="checkbox"/> Was a requirement of my job
<input type="checkbox"/> Develop existing business	<input type="checkbox"/> Wanted extra skills for my job
<input type="checkbox"/> Start my own business	<input type="checkbox"/> Get into another course
<input type="checkbox"/> Try for a different career	<input type="checkbox"/> Personal interest or self-development
<input type="checkbox"/> Get a better job/promotion	<input type="checkbox"/> Other reason

9. Disabilities

Do you have any disabilities, impairments or long-term medical conditions that may affect your studies?

☐ No, go to question 10

☐ Yes

Please indicate the areas of impairment

<input type="checkbox"/> Hearing	<input type="checkbox"/> Mobility / Physical	<input type="checkbox"/> Medical
<input type="checkbox"/> Intellectual	<input type="checkbox"/> Learning	<input type="checkbox"/> Vision
<input type="checkbox"/> Mental Illness	<input type="checkbox"/> Acquired Brain Impairment	<input type="checkbox"/> Other (Please describe)

10. Previous Study at SAE Institute or Qantm College

Have you previously studied at SAE Institute or Qantm College?

☐ No, go to question 11

☐ Yes

At which campus did you study?

Course studied

11. Academic Credit

Will you be applying for Recognition of Prior Learning (RPL) or Credit Transfer?

☐ No

☐ Yes: Please download application form from the link below

www.sae.edu.au/admissions/credit-transfers-and-study-pathways/

12. Prior Education

Your highest educational attainment

<input type="checkbox"/>	Did not complete Year 10 schooling or equivalent
<input type="checkbox"/>	Completed Year 10 schooling or equivalent
<input type="checkbox"/>	Did not complete Year 12 schooling or equivalent
<input type="checkbox"/>	Completed Year 12 schooling or equivalent
<input type="checkbox"/>	Other post school qualification (e.g. Certificate or Diploma)
<input type="checkbox"/>	Bachelor Degree
<input type="checkbox"/>	Post graduate qualification (eg Masters or PhD)
<input type="checkbox"/>	Don't know

Where did you study and what year did you finish?

13. Highest Educational Achievement of Parent/Guardian

Parent/Guardian 1

☐ Male or ☐ Female

Parent/Guardian 2

☐ Male or ☐ Female

P/G 1

- ☐
- Did not complete Year 10 schooling or equivalent
- ☐
- Completed Year 10 schooling or equivalent
- ☐
- Did not complete Year 12 schooling or equivalent
- ☐
- Completed Year 12 schooling or equivalent
- ☐
- Other post school qualification (e.g. Certificate or Diploma)
- ☐
- Bachelor Degree
- ☐
- Post graduate qualification (eg Masters or PhD)
- ☐
- Don't know

14. Employment

What best describes your current employment status? (Tick ONE box only)

- ☐ Full-time employee
- ☐ Employed - unpaid worker in a family business
- ☐ Part-time or Casual employee
- ☐ Unemployed - not seeking employment
- ☐ Self employed not employing others
- ☐ Unemployed - seeking part-time work
- ☐ Employer
- ☐ Unemployed - seeking full-time work

Who was your latest employer?

What was your position and main duties?

15. Scholarships

Will you be applying for a scholarship?

- ☐ No
- ☐ Yes: Please download application form from the link below www.sae.edu.au/admissions/scholarships/

16. Payment Options

Diplomas & Degrees

- ☐ Trimester Instalments
- ☐ FEE-HELP or VET FEE-HELP

Combination

- ☐ % Upfront
- ☐ % VET FEE-HELP

Certificates & Short Course

- ☐ Trimester Instalments
- ☐ Installments

(Instalment payment option is only available for the Certificate III in Music)

17. Declaration

By signing this application you:

Declare that:

You are seeking admission as a fee-paying student for education purposes only; You will be responsible for the full costs of the program for which you are seeking admission and for your travel and living costs;

You have read the instructions on this application form and that the information provided by you in this application is true and complete;

You have read and understood the SAE Student Handbook and Student Policies located on the SAE website at <http://www.sae.edu.au/policies/> If applicable, you have read and understood the FEE-HELP or VET FEE-HELP Handbook and all related documents.

Authorise SAE to:

Send electronic communication and information relating to your application;

Release personal information relevant to your application and visa documentation to: your nominated authorised SAE Institute Pty Ltd Agent, relevant government(s) and their agencies; associated SAE Group Institutes, companies, or their agents;

Contact any persons, institutions, companies or entities mentioned in this application in order to verify claims made by you; Use your image, name and course work in any of its marketing materials.

Understand that:

The documents submitted for your application become the property of SAE Institute Pty Ltd;

SAE may reverse any decision made on the basis of incorrect or incomplete information provided by you;

SAE reserves the right to inspect and verify the originals of supplied documents;

Applicant's signature

Date

Parent/Guardian declaration for applicants under 18

As the parent or legal guardian, I hereby give permission for the applicant to enrol in the stated course outlined in section 2, I have read and understood the declarations outlined in this application and warrant the information is true and correct.

Parent/Guardian's full name and signature

Date

Parent/Guardian Contact Details:

First name

Surname or family name

Relation to applicant

Phone number (include country and area code if outside Australia)

Mobile number (include country and area code if outside Australia)

Email address

