

# Application Form

## Part A: Applicant details

*This section to be completed by the applicant*

### Personal Details

Title:	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss.	Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other
Given Name:	Family Name:		
Date of Birth	/ / (dd/mm/yy)	Mobile:	
Email:			
Are you currently Onshore or Offshore? <input type="checkbox"/> Onshore (Australia) <input type="checkbox"/> Offshore (Outside Australia)			
<b>Address in Home Country:</b>			
City:	State:	Postcode:	Country:
<b>Address in Australia (if known):</b>			
City:	State:	Postcode:	Country:

### Passport and Visa Details

Nationality:	Passport No:	Expiry: / /
Do you already have an Australian Visa that allows you to study here? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, what type of visa do you hold? <input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Working <input type="checkbox"/> Bridging <input type="checkbox"/> Other _____		
Visa expiry date: / /	DIBP office where you intend to apply for the VISA: _____	

### Medical Coverage - OSHC

Do you have an Overseas Student Health Cover? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, would you like ZOI Education to arrange your OSHC? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If you do have Overseas Student Health Cover, please fill out the following information:		
Provider:	Membership No:	Expiry: / /

### English Proficiency & Diversity

Do you hold a certificate in English Proficiency (i.e. IELTS, PTE, etc)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please provide name of test and result: <input type="checkbox"/> IELTS <input type="checkbox"/> PTE <input type="checkbox"/> TOEFL <input type="checkbox"/> Other Result: _____		
Test attendance date: / /	Native language:	
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 attended an ELICOS course in Australia? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what was the duration? _____		

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Course Details			
Which course would you like to enrol into?	<input type="checkbox"/> CHC30113 Certificate III of Early Childhood Education and Care <input type="checkbox"/> CHC50113 Diploma of Early Childhood Education and Care <input type="checkbox"/> Full Qualification (CHC30113 Certificate III of Early Childhood Education and Care + CHC50113 Diploma of Early Childhood Education and Care)		
Preferred start date:	<input type="checkbox"/> January <input type="checkbox"/> April <input type="checkbox"/> July <input type="checkbox"/> October Specify year: _____		
Have you ever studied with ZOI Education before?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you wish to apply for <b>Credit</b> ? <i>If YES, certified copies of transcripts from previous qualifications must be provided with this form, along with a Credit Application Form.</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe I'd like more information	
Do you wish to apply for <b>Recognition of Prior Learning</b> ? <i>If you indicate YES, you will be contacted to discuss this further.</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe I'd like more information	
Tuition Fee Payment Method			
<input type="checkbox"/> ZOI Education Recommended Plan – 8 payments (start of each term)	<input type="checkbox"/> 50% of the tuition fee at the time of signing the acceptance agreement	<input type="checkbox"/> More than 50% of the tuition fee at the time of signing the acceptance agreement	<input type="checkbox"/> Payment in full

Schooling			
Are you still in secondary school? <input type="checkbox"/> Yes <input type="checkbox"/> No			
What is your highest COMPLETED school level (tick one box only)			
<input type="checkbox"/> Year 12 or equivalent	<input type="checkbox"/> Year 11 or equivalent	<input type="checkbox"/> Year 10 or equivalent	
<input type="checkbox"/> Year 9 or equivalent	<input type="checkbox"/> Year 8 or below	<input type="checkbox"/> Never attended school	
In which YEAR did you complete that school level?			
Previous Qualification Achieved			
Have you successfully completed any previous (Post -secondary) qualifications? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<input type="checkbox"/> Bachelor Degree		<input type="checkbox"/> Certificate IV (or Trade Certificate)	
<input type="checkbox"/> Advanced Diploma or associate degree		<input type="checkbox"/> Certificate II	
<input type="checkbox"/> Diploma (Or Associate Diploma)		<input type="checkbox"/> Certificate I	
<input type="checkbox"/> Certificate IV (or Advanced Certificate/Technician)		<input type="checkbox"/> Certificates other than the above	

Next of kin/emergency contact			
Name:		Relationship to	

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		you:	
Address:		Postcode	
Country:		Mobile:	
Email:			

### Disability

Do you consider yourself to have a disability, impairment or long-term condition?

☐ Yes ☐ No

If yes, please indicate the area of disability, impairment or long-term condition (*tick as many as apply*)

- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> Hearing/deaf              | <input type="checkbox"/> Intellectual | <input type="checkbox"/> Mental illness                |
| <input type="checkbox"/> Physical                  | <input type="checkbox"/> Learning     | <input type="checkbox"/> Medical condition             |
| <input type="checkbox"/> Acquired brain impairment | <input type="checkbox"/> Vision       | <input type="checkbox"/> Other (Please specify): _____ |

### Study reason

Of the following categories, which BEST describes your main reason for undertaking this course? (*Tick one box only*)

- |   |  |
|---|--|
| <input type="checkbox"/> To get a job                     | <input type="checkbox"/> It was a requirement of my job            |
| <input type="checkbox"/> To develop my existing business  | <input type="checkbox"/> I wanted extra skills for my job          |
| <input type="checkbox"/> To start my own business         | <input type="checkbox"/> To get into another course of study       |
| <input type="checkbox"/> To try for a different career    | <input type="checkbox"/> For personal interest or self-development |
| <input type="checkbox"/> To get a better job or promotion | <input type="checkbox"/> Other reasons                             |

### Agent Details

Are you using an agent? ☐ Yes ☐ No

Agency name:	Contact No:	Agent name:
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I do declare that I have checked the following GTE requirements of the student:

- |  |   |
|--|---|
| <input type="checkbox"/> Student's circumstances in their home country | <input type="checkbox"/> Student's study plan |
| <input type="checkbox"/> Previous study/work experience of the student | <input type="checkbox"/> Financial capability |
|  | <input type="checkbox"/> Visa history         |

I have assessed the student to be genuine and to be suitable to meet the requirement of the Visa application

Agent Signature

Date:     /     /

### Application Checklist

Provide a copy of the following documents with your application (you will need to bring the originals to your orientation day for verification): Please tick those that you are providing.

## Application Form

- ☐ Valid passport copy
- ☐ Valid visa (if you have one)
- ☐ High School certificate or other relevant certificates
- ☐ Proof of English Language Proficiency
- ☐ Any other relevant documents to support your application (i.e. resume)
- ☐ Application Form
- ☐ Statement of Purpose (SOP)
- ☐ ELTS/TOEFL or other English Language Certificate equivalent
- ☐ Financial statement(s)
- ☐ Video Interview presentation (Zoom/Skype)

### Privacy Statement & Student Declaration

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 ZOI Education.

I understand that my RTO, ZOI Education, 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.

If you would like us, ZOI Education to apply for a USI on your behalf you must authorise us to do so and declare that you have read the privacy information at <http://www.usi.gov.au/Training-Organisations/Pages/Privacy-Notice.aspx>. You must also provide some additional information as noted at the end of this form so that we can apply for a USI on your behalf.

I, \_\_\_\_\_ authorize ZOI Education to apply pursuant to sub-section 9 (2) of the Student Identifiers Act 2014, for a USI on my behalf.

- ☐ 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.

**Student Signature:**

**Date:**

/ /

**Printed Name:**

## Application Form

### Part B: Office use only

*This section to be completed by ZOI administration staff member*

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Provide a copy of the following documents with your application (you will need to bring the originals to your orientation day for verification): Please tick those that you are providing.

- ☐ Valid passport copy
- ☐ Valid visa (if you have one)
- ☐ High School certificate or other relevant certificates
- ☐ Proof of English Language Proficiency
- ☐ Any other relevant documents to support your application (i.e. resume)
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