



Please complete this application in BLOCK LETTERS

EDUCATION AGENT DETAILS

Do you have an education agent? Yes No

Company Name			
Consultant's Name			
Consultant's email		Mobile:	

PERSONAL DETAILS

Family name		Given name	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other	Date of birth	
Nationality		Country of birth	
Passport No.		Visa expiry date	
What visa will you be holding when you commence your studies?			
Student <input type="checkbox"/> Working <input type="checkbox"/> Other <input type="checkbox"/> Bridging (if so which one?)			
Are you currently in Australia? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you of Aboriginal or Torres Strait Islander origin? <input type="checkbox"/> No <input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Torres Strait Islander			
Mobile No.		Telephone No.	
Email			

Address of your usual residence in your home country

Property name			
Flat/unit		Street/lot number	
Street name		Suburb/locality/town	
State/territory		Postcode	
Country			

Postal address – if different from above

Property name			
Flat/unit		Street/lot number	
Street name		Suburb/locality/town	
State/territory		Postcode	
Country			

Address or intended address in Australia (if known)

Property name			
Flat/unit		Street/lot number	
Street name		Suburb/locality/town	
State/territory		Postcode	

Emergency contact details

Family Name		Given Name	
Mobile No.		Telephone No.	
Relationship			

Family member contact details in home country

Family Name		Given Name	
Mobile No.		Telephone No.	
Relationship			

HEALTH COVER

Overseas Student Health Cover (OSHC) must be arranged for the duration of your visa as a condition of your student visa. CIC can arrange health cover with Allianz Global Assistance (our preferred provider) on your behalf for the duration of your visa.

If you pay the full OSHC amount up-front, you are protected against any increases in the OSHC fees for the duration of your visa.

If you complete your studies earlier than expected, you may be entitled to a refund from Allianz Global Assistance. Health insurance is your responsibility and current cover must be maintained by students for the duration of their stay in Australia.

Do you want CIC to arrange OSHC for the duration of your visa in Australia? No Yes

If YES, please select one of the following coverage types: Single Dual Family

If NO, reason given for not commencing a new Allianz Global Assistance membership

You already have current OSHC membership for the duration of your visa.

Provider

Membership number: OSHC expiry date:

You will organise OSHC membership yourself (Evidence will be required on admission)

HIGHER EDUCATION PROGRAMS

CRICOS (VIC) No. 01718J

Higher Education Programs	Intake Dates
<input type="checkbox"/> Bachelor of Business (Accounting) CRICOS Course Code 072490C	<input type="checkbox"/> 28 October 2019
<input type="checkbox"/> Bachelor of Business (Management) CRICOS Course Code 072493M	<input type="checkbox"/> 13 January 2020
<input type="checkbox"/> Bachelor of Business (Marketing) CRICOS Course Code 072491B	<input type="checkbox"/> 23 March 2020
<input type="checkbox"/> Non-award study	<input type="checkbox"/> 1 June 2020
	<input type="checkbox"/> 17 August 2020
	<input type="checkbox"/> 26 October 2020

Are you seeking Advanced Standing (Credit Transfer)? Yes No

If YES, please complete the details below, along with your relevant supporting documents (certified academic transcripts and unit outlines).

Subject code and name you are applying for	CIC unit/subject code
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	



Previous Institution/s in which studies were undertaken	Year completed
1.	
2.	
3.	

STUDY REASON

Of the following categories, which BEST describes your main reason for undertaking this course?

- To get a job To get a better job/promotion To develop my existing business
 To start my own business It was a requirement of my job To get into another course of study
 To try for a different career I wanted extra skills for my job For personal interest or self-development
 Other reason – please specify _____

SCHOOLING AND EDUCATION

What is your highest qualification achieved?	
In which country was this qualification achieved?	
Additional qualifications achieved	

Please list all previous studies in Australia whether successfully completed or not

Start date	End date	Provider	Course

LANGUAGES

Do you speak a language other than English at home? Yes No

If YES, please specify language/s _____

How well do you speak English? Very well Well Not well Not at all

What is your certified English language level?

IELTS _____ TOEFL _____ PTE _____ Other _____

Are you currently or planning to study English whilst in Australia? Yes No

If YES, please specify at which college _____



SPECIAL NEEDS

Do you consider yourself to have a permanent and significant special needs requirement? Yes No

If YES, please indicate which:

- Hearing/Deaf Physical Intellectual Learning
- Medical Condition Mental illness Vision
- Other (please specify): _____

EMPLOYMENT

Of the following categories, which BEST describes your current employment status?

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

MARKETING

How did you hear about CIC?

- CIC website Newspaper/Magazine Facebook Exhibition/Fair Education agent
- Other (please specify): _____

DOCUMENTS ATTACHED TO THIS APPLICATION

- Certified academic transcripts Copy of passport
- Copy of Australian Visa (if applicable) IELTS Certificate or equivalent proof of English
- Advanced Standing application form (if applicable)

STUDENT DECLARATION

I, _____ acknowledge that I have read and understand the information provided above. I also acknowledge that I have read CIC's student prospectus, website, marketing material and received full information from CIC's Educational Agent (for enrolment through an educational agent) before making the decision to enrol in the course. The information and documents provided by me are true, genuine and correct in all respects.

Student signature: _____ Date: _____ / _____ / _____

SUBMIT APPLICATION

MELBOURNE CAMPUS

Email: admissions@cic.vic.edu.au

Post: Admissions, CIC Higher Education, Level 4, 108 Lonsdale Street, Melbourne VIC 3000

This form aligns with CIC Higher Education (CIC) Admissions Policy and Procedure

Please refer to the policy and/or procedure on the CIC website www.cic.vic.edu.au for more information

Privacy Statement

CIC Higher Education collects personal information about you for the purposes of enrolling you into your chosen course(s) or program(s) of study. It is essential that you supply us with current and accurate details in order to process your enrolment. We may also collect and use your information to improve our products and services. CIC will ensure that your personal information is always stored securely and will not be traded improperly. Any disclosure of your data and personal information will be done in strict adherence to CIC's Privacy and Personal Information Policy and the Privacy and Data Protection Act 2014 (Vic). Please contact our student services if you have any concerns or make a privacy complaint at info@cic.vic.edu.au