TEXILA COLLEGE AUSTRALIA

STUD050F

Admission Application Form

HOW TO COMPLETE THIS FORM

- Please write clearly 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
- Ensure that you sign the declaration at the end of this form
- **Email the completed application with supporting documents to admissions@texila.edu.au**

MAIN CAMPUS
Level 3, 440 Elizabeth Street,
Melbourne, VICTORIA 3000, AUSTRALIA
Phone: 03 9620 3559
www.texila.edu.au

TEQSA Provider ID: PRV14276
CRICOS Provider Code: 03894K
ABN: 20 614 451 286

A. COURSE DETAILS

Commencing: Month/Year: ***(Example:- March, August, October)***_____/ 20_____

CRICOS Course Code	Course Name	Duration
104938G	Bachelor of Business	156 weeks

Specialisations ☐ **Management** ☐ **Marketing** ☐ **International Business** ☐ **Accounting** ☐ **Hospitality** ☐ **Information Systems**

Texila College Australia Campus (TCA): - ☐ **City Campus** Level 3, 440 Elizabeth Street, Melbourne VIC 3000 ☐ **Regional Campus** Level 1, 66-68 Main Street, Pakenham VIC 3810

B. PERSONAL DETAILS *(AS SHOWN ON PASSPORT)*

- **Title** _____ • **Gender** ☐ **Male** ☐ **Female** ☐ **Indeterminate** • **Are you currently in Australia** ☐ **Yes** ☐ **No**
- **Given Name(s)** _____ • **Family Name / Surname** _____
- **Date of Birth** *(dd/mm/yyyy)*_____ • **Country of Birth** _____
- **Nationality** _____ • **Language spoken at home** _____
- **Passport Number** _____ • **Passport Expiry Date** *(dd/mm/yyyy)*_____

C. CONTACT DETAILS

Permanent Address in Home Country:

_____

_____

_____

_____

Tel _____ **Mobile** _____

Address in Australia:

_____

Suburb _____ Postcode _____

Postal Address *(if different)* _____

_____

Mobile _____

Email address _____

D. EMERGENCY CONTACT DETAILS

☐ **Overseas** ☐ **In Australia** • **Name**_____

- **Relationship** _____ • **Address** _____
- **Phone Number** _____ • **Email address** _____

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E. OVERSEAS HEALTH COVER (OSHC) DETAILS

- **Do you already have OSHC ? If Yes then please provide details.**
- **Provider's Name** _____ • **Type** ☐ Single ☐ Couple ☐ Family
- **Membership Number** _____ • **Expiry Date** *(dd/mm/yyyy)* _____
- **Do you want TCA to arrange OSHC for you? If yes then please provide details**

Type ☐ Single ☐ *Couple ☐ * Family

* ***(must provide copy of the passport of family members)***

F. DISABILITY SUPPORT

- **Do you have a disability, impairment or permanent medical condition that can affect your studies?** ☐ Yes ☐ No (skip to next step)

☐ Hearing / Deaf ☐ Physical ☐ Learning ☐ Intellectual

☐ Acquired brain impairment ☐ Mental Health ☐ Vision ☐ Medical Condition

G. SCHOLARSHIP DETAILS

- **Have you been granted a scholarship (Government or any kind of scholarship)?**

☐ Yes ☐ No

If yes, please attach document

H. EDUCATION DETAILS

- **What is your highest level of education achieved and year completed?** *(Example : Year 12, 2019)* _____
- **Are you currently attending school?** ☐ Yes ☐ No
- **Are you currently studying any other course?** ☐ Yes, *please specify* _____ ☐ No
- **Please list any courses you have completed or are currently studying in the table below, listing the most recent at the top:**

Previous Education						
Qualification	**Name of Institution**	**Country**	**Year Started**	**Year Completed**	**Language**	**Transcript Provided?**

I. ENGLISH LANGUAGE

- **Is English your first language?** _____
- **If no, have you taken studies in English?** ☐ Yes ☐ Evidence attached ☐ No
- **Have you taken an English proficiency test?** ☐ Yes ☐ Evidence attached ☐ No ☐ I intend to take a test

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J. VISA DETAILS

- **Do you currently hold any type of Australian Visa?** ☐ Yes *(Provide details below)* ☐ No

Visa type _____ Subclass_____ Expiry date *(dd/mm/yyyy)* _____

- **What type of student visa application will you submit to the Department of Home Affairs (DHA)?**

☐ Single ☐ *Couple ☐ * Family

- **DHA office where Application is lodged (or will be lodged)**

Country _____ City _____

Visa Application Date (Or intended if known)_____

- **Have you ever had any visa refused or cancelled in Australia or any other country?**

☐ No ☐ Yes *(provide a statement to explain)*

K. OTHER INFORMATION

- **Have you or persons included in visa application ever been convicted of a criminal offence?**

☐ No ☐ Yes *(provide a statement to explain)*

L. CREDIT TRANSFER or RECOGNITION OF PRIOR LEARNING (RPL)

- **Do you wish to apply for credit for your previous studies?** ☐ Yes ☐ No

If yes, please complete the Application for Credit or Recognition of Prior Learning

M. MARKETING

- **How did you hear about Texila College Australia?**

☐ Agent ☐ Newspaper / Magazine ☐ Google ☐ Social Media

☐ Exhibitions ☐ Website ☐ Events ☐ Other _____

☐ TCA Students. Provide ID Please _____ ☐ TCA Staff (Provide Name Please) _____

N. AGENT DETAILS (IF APPLYING THROUGH AN AGENT)

- **Company Name** _____

- **Agent's Name** _____

- **Email Address** _____ • **Contact Number** _____

I confirm that I have verified the above mentioned potential student's application, supporting and financial documents and I am satisfied that this "Admission Application Form" contains the correct information. I have assessed the applicant as a Genuine Temporary Entrant and Genuine Student as defined by the Australian Department of Home Affairs. I am satisfied that the information and documentation provided with this application is authentic and where the document has been stamped or translated by the agency, the original document has been sighted and certified.

Agent's / Representative Signature

Agent's Stamp

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O. 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)*
- ☐ Statement of Purpose (SOP) Form
- ☐ Copy of Visa *(if applicable)*
- ☐ Release letter from current Institute *(if there for less than 6 months)*
- ☐ Evidence of Overseas Health Cover *(if applicable)*
- ☐ Copies of previous 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, please specify _____

P. DECLARATION AND AGREEMENT

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

- The information on this form is true and correct. This information may be used for monitoring, program planning and statistical purposes.
- I agree that by completing and sending this form I am applying for enrolment into the course indicated above.
- I am aware that TCA only accepts students with a minimum age of 18 years at the commencement of course.
- I acknowledge that any false or misleading statement may result in denial of my admission application or subsequent cancellation of my enrolment at TCA.
- I understand that I am required to have a Unique Student Identifier (USI) and I authorize TCA to apply for USI on my behalf unless provided.
- I am aware of the tuition and living costs of my stay in Australia and have financial capacity to meet such costs for the duration of my course. I will make timely payments of any fees or associated costs.
- I understand that non-payment of fees in any semester may lead to cancellation of my enrolment.
- I declare that I will abide by the policies and procedures of TCA given in the student handbook and college website.
- I understand that to confirm my acceptance in the course, I need to read the Enrolment Acceptance Agreement and return with the initial deposit concurrently with, or after signing the agreement. I understand that upon receipt of signed agreement and initial deposit, TCA will issue Confirmation-of-Enrolment (CoE) which is also required by the Australian Government department for student visa application.
- I declare that the information provided by me and supporting document submitted with this Application Form is correct and complete. I further declare that any academic results submitted are a complete record of my results. I authorise TCA to seek verification of my academic and professional qualifications and work experience.
- I hereby grant permission for TCA to verify any documentation which accompanies this application with the issuing body.
- I understand that TCA reserves the right to alter any course, admission requirement, fee, or reject this application prior to issuing a Letter of Offer and Enrolment Acceptance Agreement.
- I understand that it is compulsory to be covered by Overseas Student Health Cover while I am on a student visa (including any dependents accompanied) in Australia.
- I understand the importance of the ESOS Framework for international students. I confirm that I can access information about the ESOS Framework from https://www.education.gov.au/esos-framework. The Education Services for Overseas Student Act (ESOS) and regulations set out the legal framework governing delivery of education to overseas students studying in Australia on a student visa.

Student Signature

_____ **Date** *(dd/mm/yyyy)* _____

When this document is returned in electronic format with all information provided, it will be deemed as being signed by the applicant.
Please keep a copy of this application for your own record and subsequent enquiry.

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