



Student Enrolment Application Form

STUDENT DETAILS

Title	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Other	Student ID Number	
Family Name		Given Name/s	
Preferred Name			
Date of birth		Are you 18 years of age or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No
First Language		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female

CONTACT DETAILS

<input type="checkbox"/> ONSHORE (YOU ARE IN AUSTRALIA) <input type="checkbox"/> OFFSHORE (YOU ARE NOT IN AUSTRALIA)							
Permanent address in home country				Address in Australia			
Address				Address			
Suburb		Postcode		Suburb		Postcode	
Telephone		Mobile		Telephone		Mobile	
Email							
Emergency contact details		Name		Relationship			
		Contact phone		Email			

NATIONALITY/ CITIZENSHIP

Passport number		Passport expiry date	
What is your Nationality on your passport?			
Do you hold an Australia Visa?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, Country of Issue			
Visa type		Expiry Date	
Education Agent Name		Education Agent Stamp	

*Forward a copy of your passport and visa with this application (if you have a visa already)

HIGHEST LEVEL OF EDUCATION ACHIEVED

Name of Highest Qualification (e.g. schooling Year 12, Qualifications: eg Cert III, IV / , Diploma or Bachelor)							
Name of Institution (Australia Year 11 or 12 equivalent)							
Completed Year		Country/State		Language of instruction			
Name of Institution (Tertiary studies)							
Completed Year		Country/State		Language of instruction			

Are you transferring from another Australian education provider? Yes No (if yes supply letter of release from your provider if you have not completed 6 months of your principal course of study)

ENGLISH LANGUAGE PROFICIENCY

English is my first language.		<input type="checkbox"/> Yes <input type="checkbox"/> No	
English was the language of instruction during my secondary school and I passed English subject in my final year. <input type="checkbox"/> Yes <input type="checkbox"/> No			
I have satisfactorily completed an ELICOS course at (Name of the Institution)			
I have applied for ESL/ELICOS course at (Name of Institution)			
I have undertaken IELTS / TOEFL / Other English Test			
IELTS Score		TOEFL Score	
Name of Other English Test		Test Score	

COURSE SELECTION

<input type="checkbox"/> BSB30115 Certificate III in Business (089568B) <input type="checkbox"/> BSB40215 Certificate IV in Business (089569A) <input type="checkbox"/> BSB50215 Diploma of Business (089570G) <input type="checkbox"/> ELICOS – IELTS Foundation (12 weeks) (089574D) <input type="checkbox"/> ELICOS General English Pre-Intermediate, Intermediate and Upper -Intermediate (12 - 36 weeks) (089573E)	<input type="checkbox"/> 222250VIC Certificate I in EAL (Access) (093724E) <input type="checkbox"/> 222251VIC Certificate II in EAL (Access) (093725D) <input type="checkbox"/> 222250VIC Certificate III in EAL (Further Study) (093726C) <input type="checkbox"/> 222258VIC Certificate IV in EAL (Further Study) (093727B)
Commencing: _____ Month	

OTHER INFORMATION

USI	
Do you have a Unique Student Identifier	<input type="checkbox"/> Yes - Provide number: _____ <input type="checkbox"/> No, do you authorise the College to secure a USI on your behalf if required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Overseas Health Cover	
Do you have Overseas Health Cover (OSHC)	<input type="checkbox"/> Yes, OSHC provider: _____ <input type="checkbox"/> No <input type="checkbox"/> Single Cover <input type="checkbox"/> Family Cover (must complete Family OSHC Application Form and provide passport copy of family members)
If No, indicate the level of cover you require:	
Do you consider yourself to have a disability/ medical condition/ learning difficulty that may impact your study? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Course Credits	
<ul style="list-style-type: none"> • Do you wish to apply for CreditTransfers? <input type="checkbox"/> Yes <input type="checkbox"/> No (if yes forward copies of transcripts) • Do you wish to apply for Recognition of prior learning? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
Airport Pickup and accommodation Services	
Do you want Legend Institute to arrange airport pick up and /or accommodation for you? <input type="checkbox"/> Airport pick up <input type="checkbox"/> Accommodation	

CHECKLIST

<input type="checkbox"/> Enrolment fee <input type="checkbox"/> Certified copies of Academic Transcripts <input type="checkbox"/> Certified copies of Graduation Certificates <input type="checkbox"/> Evidence of English Language Proficiency <input type="checkbox"/> Certified translated documents if not in English <input type="checkbox"/> Letter of release from current Australian education provider	<input type="checkbox"/> Relevant documents for RPL/Credit Transfer <input type="checkbox"/> Completed all relevant sections of the enrolment form <input type="checkbox"/> Read and understood the terms and conditions of enrolment <input type="checkbox"/> Certified copy of the personal details page of your Passport <input type="checkbox"/> Certified copy of Australian Visa (if held)
A non-refundable enrolment fee of \$350 only must be paid on lodgement of this application for enrolment.	

Privacy

Legend Institute respects client's privacy rights and operates in compliance with the Privacy Act and National Privacy Principle s 2001. Legend Institute treats all client personal information confidentially and will not disclose any details to a third party without the client's prior written consent. **

**Except where required through its commitment to comply with the National Vocational Education and Training Regulator Act 2011 and ESOS Act 2000 and supply client data to the National VET Regulator (ASQA), National Centre for Vocational Education Research (NCVER), Department of Education, Department of Immigration & Border Protection (DIBP), Tuition Protection Service and other regulatory bodies or to a court of Law. Personal information may also be disclosed to relevant bodies for the verification of your previous qualifications.

STUDENT DECLARATION

- I acknowledge that my Education agent has provided me with full information on Legend Institute, the courses applied for, student visa information and information on living and studying in Melbourne. (If enrolled through an Education agent)
- I acknowledge that I have read and understood the information in Legend Institute's Student handbook, website, marketing material before making the decision to submit this enrolment application.
- I understand that by signing this enrolment form, I may be sent a Formal Letter/s of Offer/Written Agreement Contract from Legend Institute, if all of the admission requirements are met.
- I authorise Legend Institute to contact me SMS, Email or Phone number.
- I authorise Legend Institute to verify any information provided in this form.
- I give Legend Institute permission to obtain official records/ confirm detail from a previous educational institution attended by me listed on this form.
- I am aware off and agree to abide by visa conditions throughout my enrolment period in Australia.
- I understand my enrolment fee (\$350) payable with the lodgement of this form is not refundable in all circumstance.
- I grant Legend Institute permission to source a Unique Student Identifier from NCVER, on my behalf (students who do not currently possess a USI only.)
- I acknowledge that I have been provided the opportunity to clarify any item relating to my enrolment at Legend Institute prior to submitting this enrolment form.
- I declare that the information provided by me in this application true, correct and complete at this time.
- I acknowledge that providing false. Misleading or inaccurate information may affect the acceptance of this application and/or the continued provision of training and assessment service.

Studentsignature _____ Date _____

How did you first learn about Legend institute?

- Agent recommendation Newspaper/magazine Recommended by a friend/relative Internet Other

OFFICIAL USE ONLY			
Application assessed by:		Date	
Outcome of application <input type="checkbox"/> Place offered <input type="checkbox"/> Application declined <input type="checkbox"/> Further information requested			
Reason for declining application or details of further information requested			