

### Student details

Title: \_\_\_\_\_ First name: \_\_\_\_\_ Family name: \_\_\_\_\_  
 Marital status:    Single            Married            Divorced            Widowed  
 Date of birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_ Gender:    Male            Female Country of Birth: \_\_\_\_\_  
 Nationality: \_\_\_\_\_ Address (home address): \_\_\_\_\_  
 \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
 Address in Australia (if Known): \_\_\_\_\_  
 Mobile no.: \_\_\_\_\_ Passport no.: \_\_\_\_\_ Expire date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Onshore    Offshore

### Campus

Sydney

Melbourne

### Course details

| Course name   | CRICOS  | Semesters |   |   | Year   |
|---|---------|-----------|---|---|--------|
| Diploma of Business                                     | 085156K | 1         | 2 | 3 | 20____ |
| Diploma of Business Information Systems                 | 085158G | 1         | 2 | 3 | 20____ |
| Bachelor of Business                                    | 085157J | 1         | 2 | 3 | 20____ |
| Bachelor of Business Information Systems                | 085159G | 1         | 2 | 3 | 20____ |
| Graduate Certificate in Project Management (GradCertPM) | 066176G | 1         | 2 | 3 | 20____ |
| Graduate Diploma in Project Management (GradDipPM)      | 066177G | 1         | 2 | 3 | 20____ |
| Master of Business and Project Management (MBPM)        | 077591B | 1         | 2 | 3 | 20____ |

Applying for Scholarship?    YES            NO

Note: A limited number of scholarships are available for studying Master or MBA degrees; candidates must complete their course within the permitted duration with academic merit.

### Education and experience

#### ACADEMIC QUALIFICATIONS\* (please list most recent qualification)

Name of Qualification: \_\_\_\_\_

School/Institution: \_\_\_\_\_ Country \_\_\_\_\_ State \_\_\_\_\_

Start Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Completion Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name of Qualification: \_\_\_\_\_

School/Institution: \_\_\_\_\_ Country \_\_\_\_\_ State \_\_\_\_\_

Start Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Completion Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

#### Employment history\*

\* Please attach your CV (Resume)

## Agent Details

Did an agent assist you with the enrolment? YES NO

Agency name: \_\_\_\_\_

What is the name of the counsellor? \_\_\_\_\_

Email: \_\_\_\_\_

## Visa and insurance details

Put a tick (✓) in the box for the Visa you are currently holding or will travel on:  
Student Visitor (tourist) Working Holiday Other

If you are travelling on a Student Visa, the Australian Government requires you to have Overseas Student Health Cover (OSHC).  
Do you require OSHC? YES NO Cover required: Single Family

If you require family cover, please list your dependant(s) name(s)

Name: \_\_\_\_\_ Male Female DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_ Male Female DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_ Male Female DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_ Male Female DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

## References

Please organise for at least two referees to write to the Academic Management Office of the College to provide confidential testimonials (in sealed envelopes) on your behalf. The testimonial should be in original form, signed and dated by the referee on an official letterhead with all the necessary details so that the College can verify the authenticity of the same via phone or fax. Email testimonials may be acceptable at the discretion of the Academic Management Office.

## Applicant declaration

I declare that the information submitted in this application is correct and complete. I acknowledge that my admission and continued enrolment will be subject to APIC's.

General Regulations and Policies as well as the School of Business Management applicable Resolutions. I agree that the College may obtain official records from my previous employers or universities I attended. I undertake to advise the College immediately of any changes to the information submitted in this application.

I consent to the above information being maintained in the College's records for administration and academic purposes and reported to the regulatory authorities for official purposes.

I understand that APIC may be required to report to the relevant government authorities the progress of my application and or subsequent student status. I consent to my information being held securely by the relevant regulatory authority and that my information may be disclosed to the Australian Taxation Office. APIC will not otherwise disclose the information without my consent unless required or authorised by law.

I declare that I have read and understood APIC's fee schedule, conditions of enrolment, privacy statement and refund policy and have familiarised myself with other relevant policies located on the APIC website and agree to be bound by them.

I undertake to advise APIC immediately of any changes to the information submitted in this application.

I have fully read and understood the College terms and conditions. I declare that I have the financial capacity to meet course fees and agree to pay these fees as they become due and I have read, fully understood and accept the College's terms and conditions.

(All applicants **MUST** sign this declaration)

I (Applicant Name) \_\_\_\_\_ have fully read and understood the College terms and conditions.

Signature: \_\_\_\_\_ date: \_\_\_\_/\_\_\_\_/\_\_\_\_

If fees are being paid by another person(s) or company: I \_\_\_\_\_ (name of person(s) / company paying fees – please print) declare that I have the financial capacity to meet course fees and agree to pay these fees as they become due and I have read, fully understood and accept the College's terms and conditions.

## Submitting your application

| Postal Address   | Email                   | Fax             |
|--|-------------------------|-----------------|
| Asia Pacific International College<br>55 Regent St<br>Chippendale 2008<br>New South Wales<br>AUSTRALIA | apply@apicollege.edu.au | +61 2 9698 5201 |

## Application Checklist

A certified copy of your passport

A certified copy of your academic records.

Documents not in English should be provided with a certified translation. If your name differs from that under which you gained your qualification, you must present evidence of the name change.

Evidence of English language proficiency

A copy of your CV (resume)

Work experience letter