

PERSONAL DETAILS

Family name:	Date of Birth (dd/mm/yy): / /
Given name:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Indeterminate
Email:	Telephone:
Residential address: Number & Street Suburb/Town State Country	Postal address (if different from residential): Postcode
Nationality:	In which country were you born?:
Do you speak a language other than English at home? <input type="checkbox"/> No, English only <input type="checkbox"/> Yes Mother tongue:	Are you of Aboriginal/ Torres Strait Islander origin? <input type="checkbox"/> No <input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Torres Strait Islander
Do you consider yourself have a disability, impairment or long term condition? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please select: <input type="checkbox"/> Hearing <input type="checkbox"/> Physical <input type="checkbox"/> Intellectual <input type="checkbox"/> Learning <input type="checkbox"/> Mental Illness <input type="checkbox"/> Acquired brain Impairment <input type="checkbox"/> Vision <input type="checkbox"/> Medial condition <input type="checkbox"/> Other:	
What is your highest completed school level? (Tick 1 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	Are you still attending secondary school? <input type="checkbox"/> No <input type="checkbox"/> Yes
Have you successfully completed any of the following qualifications (Tick all that apply) <input type="checkbox"/> Bachelor degree or higher <input type="checkbox"/> Advanced diploma or associate degree <input type="checkbox"/> Diploma or associate diploma <input type="checkbox"/> Certificate IV <input type="checkbox"/> Certificate III <input type="checkbox"/> Certificate II <input type="checkbox"/> Certificate I <input type="checkbox"/> Other <input type="checkbox"/> No qualification	
Which best describes your current employment status? (Tick 1 box only) <input type="checkbox"/> Full-time employee <input type="checkbox"/> Part-time employee <input type="checkbox"/> Self employed- not employing others <input type="checkbox"/> Self employed- employing others <input type="checkbox"/> Employed- unpaid work in a family business <input type="checkbox"/> Unemployed- Seeking full-time work <input type="checkbox"/> Unemployed- Seeking part-time work <input type="checkbox"/> Unemployed- Not seeking employment	
Which best describes your main reason for this study? (Tick 1 box only) <input type="checkbox"/> To get a job <input type="checkbox"/> To develop my existing business <input type="checkbox"/> To start my own business <input type="checkbox"/> To try for a different career <input type="checkbox"/> To get a better job/promotion <input type="checkbox"/> It was a requirement of my job <input type="checkbox"/> I wanted extra skills for my job <input type="checkbox"/> To get into another course of study <input type="checkbox"/> For personal interested/self development <input type="checkbox"/> To get skills for community/voluntary work <input type="checkbox"/> Other	

USI & TFN

My USI (Unique Student Identifier) is:	You can apply online http://www.usi.gov.au/students
My TFN (Tax File Number) is:	You can apply online https://www.ato.gov.au/individuals/tax-file-number/

COURSE

<input type="checkbox"/> SIT50116 Diploma of Travel and Tourism Management
<input type="checkbox"/> SIT50416 Diploma of Hospitality Management (Operations Strand)
1st course start date: / / Note: Please see course calendar for start dates

PAYMENT

<input type="checkbox"/> I wish to apply for VET student loans
--

DECLARATION

I confirm that the information provided on this form is complete and correct. I acknowledge this is an application only (i.e. there is no guarantee of a place). If an offer is made to me my acceptance is subject to the terms and conditions set out in the letter of offer.		Agent/ representative stamp (if applicable):
Signature: Parent or Legal Guardian if student is under 18 yrs old	Date: / /	