



Western Sydney
Technology College

1. COURSE TO APPLY

 LIST THE COURSES BELOW:

 DELIVERY MODE:

 PREFERRED INTAK DATE

*Please refer to our website for intake details, schedule and all entry

2. PERSONAL DETAILS

SURNAME	FIRST NAME
GENDER <input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Unspecified	DATE OF BIRTH
COUNTRY OF BIRTH	YEAR OF ARRIVAL

STUDY REASON
(E.g. Career, new skills)

ADDRESS (Overseas)	STREET ADDRESS	CITY/TOWN/ SUBURB
	STATE/PROVINCE	COUNTRY
		ZIP CODE/ POSTCODE

TEL (Overseas):	MOBILE (Overseas)
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EMAIL

ADDRESS (Australia)	STREET ADDRESS	CITY/TOWN/ SUBURB
	STATE/PROVINCE	COUNTRY
		ZIP CODE/ POSTCODE

TEL ((Australia)	MOBILE (Australia)
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EMAIL

MAIN LANGUAGE SPOKEN AT HOME

3. AGEN INFORMATION

AGENT NAME	AGENCY NAME
STREET ADDRESS	CITY/TOWN/ SUBURB
STATE/PROVINCE	COUNTRY ZIP CODE/ POSTCODE

TEL:	MOBILE:
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EMAIL	RELATIONSHIP TO YOU
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4. EMERGENCY CONTACT
1. EMERGENCY CONTACT

SURNAME	FIRST NAME
STREET ADDRESS	CITY/TOWN/ SUBURB
STATE/PROVINCE	COUNTRY ZIP CODE/ POSTCODE

TEL:	MOBILE:
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EMAIL	RELATIONSHIP TO YOU
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2. EMERGENCY CONTACT

SURNAME		FIRST NAME	
STREET ADDRESS		CITY/TOWN/ SUBURB	
STATE/PROVINCE		COUNTRY	ZIP CODE/ POSTCODE
TEL:		MOBILE	
EMAIL		RELATIONSHIP TO YOU	

5. EDUCATION DETAILS

What is the highest qualifications you have successfully completed? Please indi-

- | | | | | |
|----------------------------------|---|---|--|---|
| <input type="checkbox"/> HSC | <input type="checkbox"/> Certificate I | <input type="checkbox"/> Certificate II | <input type="checkbox"/> Certificate III | <input type="checkbox"/> Certificate IV |
| <input type="checkbox"/> Diploma | <input type="checkbox"/> Advanced Diploma | <input type="checkbox"/> Bachelors | <input type="checkbox"/> Masters | <input type="checkbox"/> PhD |

HIGH SCHOOL ATTENDED

YEAR OF COMPLETION

Do you wish to apply for Course Credit?

If Yes, please provide the details of course/ unit (s) / module (s) you wish to apply for.*

-
- No
-
- Yes

Note: Students with overseas qualifications must submit relevant acknowledgement for qualification attained overseas. Please refer to <https://internationaleducation.gov.au/services-and-resources/pages/qualifications-recognition.aspx>
**refer to RPL Policy available on website*

Please provide certified copies of educational documents and results of any English Language Competency test as stated.

REQUIRED BAND(s)

- | | |
|---------------------------------------|--|
| <input type="radio"/> PTE 43 | <input type="radio"/> IELTS (Academic) 5.5 |
| <input type="radio"/> TOEFL (IBT) 71 | <input type="radio"/> Cambridge English: Advanced (CAE) 47 |
| <input type="radio"/> TOEFL (PBT) 527 | |

Your Score:

Year Awarded:

6. UNIQUE STUDENT IDENTIFIER (USI)

 Do you have a Unique Student Identifier Number Yes - If Yes, my USI number is:

USI no:

WSTC to create a USI on your behalf

-
- I would like WSTC to create USI on my behalf
-
-
- I give permission to WSTC to create a USI on my behalf.
-
-
- I have provided WSTC with a copy of the following form of personal identification (ID) to create or (verify) my USI

Creating your own USI

-
- I will create my own USI account and provide my USI to WSTC.

 To create USI visit: <http://www.usi.gov.au/pages/default.aspx>
7. PASSPORT DETAILS

PASSPORT NUMBER	EXPIRY DATE	ISSUED BY
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8. VISA DETAILS

 Are you currently in Australia? NO YES - Please specify VISA Category and Expiry Date

VISA CATEGORY	VISA EXPIRY DATE
Where (City/Country) you intend to lodge VISA Application	CITY COUNTRY

Date you intend to lodge VISA application (dd/mm/yyyy)

9. OVERSEAS STUDENT HEALTH COVER (OSHC)

 Did you arrange health cover for the duration of your stay in Australia? NO YES

If Yes, what are the details of the insurance?

Name of Insurer

Membership Number

If no, do you authorize WSTC to arrange OSHC on your behalf? NO YES

 Type of cover do you required? SINGLE STUDENT COUPLE FAMILY (number of members)_____

10. ACCOMODATION (OPTIONAL)

 Do you require us to arrange accomodation? NO YES If YES, please provide your flight details (no later than 2 weeks prior to your arrival) charges apply.

PERSONAL PREFERENCES Do you have special food requirements? NO YES Please indicate:

AIRPORT PICKUP (OPTIONAL) NO YES If YES, please provide your flight details (no later than 2 weeks prior to your arrival) applied charge \$150 AUD.

11. DISABILITY

 Do you consider yourself to have any disability, impairment or long term condition? NO YES Please indicate:

TERMS AND CONDITIONS
12. VISA CONDITION

As per relevant legislative/regulatory framework

- International Student must maintain a mandatory attendance requirement which is a minimum of 80% of the 20 hours study load per week.
- International students must maintain satisfactory course progress
- Comply to the course schedule and confirmation of enrolment
- International students must have obtained Overseas Student Health Cover (OSHC) prior travelling to Australia

13. PRIVACY STATEMENT

Personal information provided by the student will be kept private and will not be shared with any organisation unless legally required to do so. Legally we are obligated to provide students personal information to:

- Department of Home Affairs (DHA) if changes applied to student's enrolment or if student's attendance and course progress is observed unsatisfactory
- ESOS Assurance Fund Manager
- Any other legally authorised department or institution.

14. FEE

Information regarding international student's eligibility to work please refer to DHA website

1. The enrolment fee of \$250 AUD is non-refundable
2. Initial fee is due upon submission of Letter of Acceptance by the student
3. Tuition Fee must be paid in advance prior to start of each term.
4. If you want WSTC to arrange OSHC, accommodation and airport pickup; charges to be paid upon submitting the Letter of Acceptance.
5. RPL related fees will be charged as per RPL Policy (refer to WSTC website)
6. Other Fees apply accordingly based on goods and services being provided.
7. For refund related matter please refer to (Refund Policy) WSTC website.

15. DECLARATION

- I have read and understood the information provided in this application form and in the Student handbook (available online at www.wstc.edu.au).
- I agree to adhere to the policies and procedures of WSTC.
- I commit to paying my student fees in accordance with WSTC policy.
- I give permission to WSTC to release data to bodies covered under government legislation with regard to statistical information
- I acknowledge that it is my duty to update WSTC administration of any change in details.

The terms and conditions stated do not remove the right of the student to undertake action under Australia's consumer protection laws.

National & state legislation regulation including any variation time to time. I will provide WSTC with up to date and accurate contact details and will notify WSTC within 7 days of the change occurring. I declare that the information provided in this Application "ENROLMENT FORM FOR INTERNATIONAL STUDENT" is true, correct and complete and that I understand and agree to comply with the terms and conditions as set out in this form.

SIGNATURE OF APPLICANT

DATE

APPLICATION MAILING ADDRESS

 PO BOX 154, PARRAMATTA NSW 2124, AUSTRALIA
 EMAIL: info@wstc.edu.au

AGENT'S STAMP / INFORMATION

COMPANY

REFERRING PERSON

DATE OF REFERRAL

SIGNATURE

STAMP/DATE

APPLICATION DOCUMENT CHECKLIST

- Complete all sections of the application form
- Read and understand all terms and conditions
- Enrolment form signed
- Certified copies of qualifications & transcript attached
- Evidence of English language proficiency is mentioned
- Valid Passport Copy

OFFICE USE ONLY

DATE RECEIVED

PAYMENT RECEIVED

AMOUNT RECEIVED INCLUDES

- Enrolment Fee
- Tuition Fee
- OSHC Fee
- Accomodation
- Airport Pickup

Signature: