

STUDENT DETAILS

Family Name _____

Given Name(s) _____

Gender Male Female Date of Birth dd / mm / yyyy _____

Nationality _____ Country of Birth _____

Language Spoken _____

Current Address _____

Suburb/Town/City _____ State _____

Postcode/Zipcode _____ Country _____

Telephone/Mobile Number _____

Email _____

VISA

Passport Number _____

Which visa type do you plan to study under at SELC Australia?
 Student* Working Holiday Tourist Other _____

*Which country will you lodge your visa application in? _____

SELC ENGLISH COURSE OPTIONS

COURSE	BONDI	START DATE	#WEEKS
General Intensive English (Full-Time) CRICOS 030264E	<input type="checkbox"/> Daytime <input type="checkbox"/> Evening		
General Intensive English (Part-time) CRICOS 030264E	<input type="checkbox"/> Daytime		
IELTS Preparation Daytime: Academic CRICOS 068858K Evening: General	<input type="checkbox"/> Daytime <input type="checkbox"/> Evening		
Cambridge Test Preparation F C E CRICOS 030269M	<input type="checkbox"/> Daytime <input type="checkbox"/> Evening		
Cambridge Test Preparation C A E CRICOS 030269M	<input type="checkbox"/> Daytime		
Cambridge Test Preparation C P E CRICOS 030269M	<input type="checkbox"/> Daytime		
English for Customer Service Communication (+ Barista) CRICOS 053857A	<input type="checkbox"/> Daytime <input type="checkbox"/> Evening		
Academic English Program (AEP) CRICOS 082833B	<input type="checkbox"/> Daytime		

*Check SELC website for course start dates and entry requirements. (www.selceducation.com)

COURSE BREAKS

Do you require break during the course?
(must be pre-arranged at the time of enrollment)

No Yes, weeks from dd / mm / yyyy to dd / mm /

Do you require a second break during the course?

No Yes, weeks from dd / mm / yyyy to dd / mm /

What is your English Level at the moment?

Beginner Elementary Pre-intermediate Intermediate

Upper Intermediate Advanced

FURTHER EDUCATION

Do you wish to study in Australia after completing your English Course?
 No Yes (Please complete the following questions)

Institution Name _____ Start Date dd / mm / yyyy _____

Course Name _____

OVERSEAS STUDENT HEALTH COVER (OSHC)

Do you want SELC to arrange your OSHC? (student visa only)
 No Yes (Please complete the following questions)

OSHC Cover Type Single Couple Family
 (Couple & Family Cover: Please attach passport copies of all partners and family members)

ACCOMMODATION

Do you want SELC to arrange your Accommodation?
 No Yes, for Weeks _____

Check in date dd / mm / yyyy Check out date dd / mm / yyyy

*Homestay check-in must be on the Saturday or Sunday immediately before the course begins.

Type of Accommodation:

1. Homestay (2 weeks minimum stay)
 Half Board (Breakfast & Dinner) Room & Facilities (No meals)
 Single Twin (with travelling companion)

Do you smoke? No Yes, I will only smoke outside

Do you have any allergies? No Yes

Can you describe? _____

2. SELC Bondi Lodge (4 weeks minimum stay)
 Single (with bath) Single (share bath)
 Twin/Double (with bath) Twin/Double (shared bath)

ARRIVAL DETAILS

Do you want SELC to arrange your Airport Transfer? No Yes

One way Return Flight Number _____

Arrival Date dd / mm / yyyy Arrival Time : am / pm

*NB: Changes in arrival details must be advised to SELC 72 hours in advance.
 If delayed in transit please contact our emergency representative as stated on your accommodation booking confirmation letter.

REFERRAL

How did you learn about SELC?

Agent Stamp (if applicable)

DECLARATION

I confirm that the information I have provided is correct and that I have read, understood and agreed to abide by the SELC Australia Conditions of Enrolment. I authorise the SELC Australia Pty Ltd to verify any facts and hereby consent to the information being provided to a third party for further verification. I understand that if any information is found to be false or misleading my enrolment may be cancelled. I accept, will comply with policies and rules of SELC Australia Pty Ltd. It is my responsibility to familiarise myself with the latest version of the Student Handbook and policies and procedures, which can be found on www.selceducation.com.

Office use only Student #

Enrol #

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CREDIT TRANSFER / RECOGNITION OF PRIOR LEARNING

Are you applying for Credit Transfer or Recognition of Prior Learning?
 No Yes (If yes, please provide certified copies of transcripts and details of the course)

SELECT YOUR CAMPUS AND COURSE

CODE	COURSE NAME	APPROX. DURATION	TERMS	SYDNEY CBD	BONDI JUNCTION
<input type="checkbox"/> BSB30415	Certificate III in Business Administration CRICOS: 089939B	9 months	3	☀️🌙	🌙
<input type="checkbox"/> BSB50215	Diploma in Business CRICOS: 095548M	12 months	4	☀️🌙	🌙
<input type="checkbox"/> BSB41515	Certificate IV in Project Management Practice CRICOS: 095546B	9 months	3	☀️🌙	🌙
<input type="checkbox"/> BSB51415	Diploma of Project Management CRICOS: 089940J	12 months	4	☀️🌙	🌙
<input type="checkbox"/> BSB61215	Advanced Diploma of Program Management CRICOS: 095549K	12 months	4	☀️🌙	🌙
<input type="checkbox"/> BSB42015	Certificate IV in Leadership and Management CRICOS: 095547A	9 months	3	☀️🌙	🌙 Fri&Sat
<input type="checkbox"/> BSB51915	Diploma of Leadership and Management CRICOS: 095550F	12 months	4	☀️🌙	🌙 Fri&Sat
<input type="checkbox"/> BSB61015	Adv. Diploma of Leadership and Management CRICOS:089941G	12 months	4	☀️🌙	🌙
<input type="checkbox"/> SIS30315	Certificate III in Fitness CRICOS code: 091882G	9 months	3	————	☀️🌙 Fri&Sat
<input type="checkbox"/> SIS40215	Certificate IV in Fitness CRICOS code: 091883F	12 months	4	————	☀️🌙
<input type="checkbox"/> CHC30113	Cert. III in Early Childhood Education & Care CRICOS: 081686E	9 months	3	☀️🌙	————
<input type="checkbox"/> CHC50113	Diploma of Early Childhood Education & Care CRICOS: 081687D	18 months	6	☀️🌙	————
<input type="checkbox"/> Both Above	Certificate III + Diploma of Early Childhood Education and Care	21 months	7	☀️🌙	————

If you are enrolling for more than one course please tick multiple courses. Timetables are subject to change and availability.

UNIQUE STUDENT IDENTIFIER NUMBER (USI)

USI _____

All students applying for a VET course must supply their Unique Student Number (USI). More information about USI, including how to apply for your USI online at www.usi.gov.au

ENTRY REQUIREMENTS CHECKLIST

All Applicants (Evidence of the following must be provided)
 Year 12 or equivalent and above (translated to English)
 IELTS 5.5 or equivalent and above Passport

OVERSEAS STUDENT HEALTH COVER (OSHC)

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 No Yes (Please complete the following questions)
 OSHC Cover Type Single Couple Family
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INTAKE DATES

If you are enrolling for more than one course, select only the intake date for the first course.

2018
 16 July 08 October

2019
 29 January 23 April
 15 July 08 October

2020
 28 January 20 April
 13 July 06 October

Which Campus would you prefer to study?
 City Bondi
 Your timetable choice:
 Daytime Evening Fri&Sat

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