



International Student Application Form

Preferred Intake Month

PROFESSIONAL AND ADVANCED COURSES

DURATION (Weeks)

BSB80120	Graduate Diploma of Management (Learning)	104
BSB50420	Diploma of Leadership and Management	52
BSB60420	Advanced Diploma of Leadership and Management	78
BSB50120	Diploma of Business	52
BSB60120	Advanced Diploma of Business	78
ICT60220	Advanced Diploma of Information Technology	104
RIL60520	Advanced Diploma of Civil Construction Design	104

SKILLED TRADES COURSES

CPC40120	Certificate III in Carpentry	52
MSF30322	Certificate III in Painting and Decorating	52
CPC33020	Certificate III in Wall and Floor Tiling	52
CPC31020	Certificate III in Solid Plastering	52
CPC31320	Certificate III in Bricklaying and Blocklaying	52
CPC30620	Certificate III in Cabinet Making and Timber Technology	52
CPC30220	Certificate IV in Building and Construction	52

ENGLISH LANGUAGE COURSES (ELICOS)

- ☐ General English (Please specify the number of weeks..... (CRICOS CODE: 116249M)
- ☐ English for Academic Purposes (Please specify the number of weeks.....(CRICOS CODE: 116250G)

Personal Details

Title: Mr. Mrs. Ms. Dr. Other Gender: Male Female

Family name (as in passport): Given name(s):

Date of Birth (dd/mm/yy): Nationality (as per passport):

Contact Details in Home country

Address: Country: Post Code:

Telephone/ Mobile: Email:

Contact Details in Australia

Address: State: Post Code:

Telephone/ Mobile: Email:

Emergency Contact Details

Name: Phone Number:

Address: Relationship to Applicant:

Visa Information

Passport Number: Expiry Date:

Visa Type: Subclass: Expiry Date:

What type of visa will you be holding when you commence your studies?

☐ Student ☐ Working Holiday ☐ Tourist ☐ Other

Have you applied to become a permanent residence of Australia? ☐ Yes ☐ No

If yes, date of application (dd/mm/yy):



USI Information (Unique Student Identifier)

USI Number:

If you do not have USI yet, please go to www.usi.gov.au to apply for it. If you are a new or continuing student undertaking nationally recognised training, you need a USI in order to receive your qualification or statement of attainment.

Language and Cultural Diversity

In which country were you born? ☐ Australia ☐ Other – Please specify:

Do you speak a language other than English at home? ☐ No ☐ Yes – Please specify:

How well do you speak English? ☐ Very well ☐ Well ☐ Not well ☐ Not at all

Are you of Aboriginal or Torres Strait Islander origin? ☐ No ☐ Yes – Please specify:

Previous Education

Have you done your schooling? ☐ Yes ☐ No

Highest Qualification:

Name of Institute: Completed Year:

Disability

Do you have any of the following disabilities, impairments or long-term conditions? ☐ Yes ☐ No

If 'Yes', then please indicate the areas of disability, impairment or long-term condition:

- | | | | |
|---|-----------------------------------|--|--|
| <input type="checkbox"/> Hearing/Deaf | <input type="checkbox"/> Physical | <input type="checkbox"/> Intellectual | <input type="checkbox"/> Acquired Brain Impairment |
| <input type="checkbox"/> Mental Illness | <input type="checkbox"/> Vision | <input type="checkbox"/> Medical Condition | <input type="checkbox"/> Other |

Employment

Of the following categories, which BEST describes your current employment status?

- | | | | |
|--|--|--|-----------------------------------|
| <input type="checkbox"/> Full-time employee | <input type="checkbox"/> Part-time employee | <input type="checkbox"/> Self-employed | <input type="checkbox"/> Employer |
| <input type="checkbox"/> Employed in a family business | <input type="checkbox"/> Unemployed - seeking work | <input type="checkbox"/> Not employed - not seeking employment | |

Study Reason

Of the following categories, which BEST describes your main reason for undertaking this course?

- | | |
|--|--|
| <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 or promotion | <input type="checkbox"/> It was a requirement of my job |
| <input type="checkbox"/> To get into another course of study | <input type="checkbox"/> For personal interest or self-development |
| <input type="checkbox"/> Other reasons | |

RPL/Credit

Are you seeking recognition of prior learning (RPL) or course credit transfer? ☐ Yes ☐ No

If 'Yes', then please contact training manager for further details about the RPL/CT process

Transferring student information: (if applicable)

Are you transferring from another education provider in Australia? ☐ Yes ☐ No

If 'Yes', then have you completed the first 6 months of your principal course? ☐ Yes ☐ No

Name of Institute:

If you currently enrolled in another institute in Australia please provide release letter.

Education Agent Details

If you were referred by an Education Agent, please provide details below.

Agent Name/Business Name:

As an approved agent of Institute of Management and Computing, I am also certifying that I have verified all the original documents of the student.

Signature _____



Address: Ground Floor 61, Riggall Street,
Broadmeadows, VIC, 3047 Australia



INSTITUTE OF MANAGEMENT & COMPUTING

Be educated & feel empowered

Ph: 0391 913 448
Email: info@imc.vic.edu.au
Website: www.imc.vic.edu.au
Address: Ground Floor 61, Riggall Street,
Broadmeadows, VIC, 3047 Australia

I Consent to the collection use and disclosure of my personal information in accordance with the Privacy Notice Above.

Applicant Name

Applicant Signature

Date..... / /

Document Checklist

- ☐ Passport bio-data pages
- ☐ IELTS (or other English Language test) Results (if applicable)
- ☐ Evidence of highest academic qualifications
- ☐ Copy of current Australian Visa (if applicable)
- ☐ OSHC Certificate (if applicable)

FOR OFFICE USE ONLY

DATE

D	D	M	M	Y	Y	Y	Y
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Approved by:

Signature: _____