

APPLICATION FORM

FOR INTERNATIONAL STUDENTS (E-02)



Application Form must be completed in full, incomplete forms will not be processed.

Personal Details

FAMILY NAME
GIVEN NAME(S)
GENDER ☐ MALE ☐ FEMALE ☐ OTHER
DATE OF BIRTH DD / MM / YYYY

Contact Details

Are you currently in Australia? ☐ YES ☐ NO

ADDRESS IN AUSTRALIA (IF YOU ARE IN AUSTRALIA)

POSTCODE

OVERSEAS ADDRESS (IF YOU ARE **NOT** IN AUSTRALIA)

SUBURB/TOWN/CITY

STATE/PROVINCE

COUNTRY

POSTCODE/ZIPCODE

MOBILE NUMBER

EMAIL

Passport Details

PASSPORT NUMBER

COUNTRY OF ISSUE

NATIONALITY

PLACE OF BIRTH

DATE OF ISSUE DD / MM / YYYY

DATE OF EXPIRY DD / MM / YYYY

Visa & OSHC

VISA TYPE ☐ STUDENT (SUBCLASS 500)
☐ VISITOR (SUBCLASS 600)
☐ WORKING HOLIDAY (SUBCLASS 417 & 462)
☐ AUSTRALIAN PERMANENT RESIDENT
☐ OTHERS (PLEASE SPECIFY)

If you have not applied for a visa yet, please select the visa type you plan to apply for.

Do you need an eCoE? ☐ YES ☐ NO

Do you need SEA English Academy to organise your OSHC?

☐ YES ☐ NO

If Yes (you need SEA English Academy to organise your OSHC on your behalf)

TYPE OF YOUR OSHC ☐ SINGLE ☐ COUPLE ☐ FAMILY

START DATE DD / MM / YYYY END DATE DD / MM / YYYY

Enrolment Details

PLEASE SELECT YOUR COURSE

☐ GENERAL ENGLISH (042504F)

☐ ENGLISH FOR ACADEMIC PURPOSES (EAP) (113988M)

DELIVERY LOCATION

☐ LONSDALE CAMPUS (117 Lonsdale St, Melbourne)

SESSION (Actual class time is subject to availability*)

☐ AM

☐ PM

INTAKE DATE

DD / MM / YYYY

COURSE LENGTH

WEEKS

Language and Cultural Diversity

In which country were you born?

Do you speak a language other than

☐ YES

☐ NO

English at home? If yes, please specify:

Are you of Aboriginal or Torres Strait

☐ YES

☐ NO

Islander origin?

Disability

Do you consider yourself to have a disability, impairment, or long-term condition?

☐ YES

☐ NO

If you indicated the presence of a disability, impairment, or long-term condition, please select the area(s) in the following list:

☐ Hearing/deaf

☐ Physical

☐ Intellectual

☐ Learning

☐ Vision

☐ Medical condition

☐ Acquired brain impairment

☐ Mental illnesses

☐ Others (please specify)

Schooling

What is your highest completed school level?

☐ Year 12 or equivalent

☐ Year 11 or equivalent

☐ Year 10 or equivalent

☐ Year 9 or equivalent

☐ Year 8 or below

☐ Never attended to school

Please specify the year you completed of your highest completed school level (if applicable):

Are you still enrolled in secondary or senior secondary education?

☐ YES

☐ NO

Study Reason

Of the following categories, select the one which BEST describes your main reason for undertaking this course/traineeship/apprenticeship?

☐ To get a job

☐ It was a requirement of my job

☐ To develop my existing business

☐ I wanted extra skills for my job

☐ To start my own business

☐ To get into another course of study

☐ To try for a different career

☐ For personal interest or self-development

☐ To get a better job or promotion

☐ Other reasons

Previous Qualification

Have you successfully completed any of the qualifications listed under “Schooling”?

☐ YES ☐ NO

If Yes, please tick ANY applicable boxes

- A – Qualification has been completed in Australia
E – Qualification has been completed overseas and recognised formally in Australia
I – Qualification has been completed overseas but not recognised in Australia

| Qualification | A | E | I |
|--|--------------------------|--------------------------|--------------------------|
| Bachelor’s degree or higher degree | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Advanced diploma or associate degree | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Diploma (or associate diploma) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Certificate IV (or advanced certificate/technician) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Certificate III (or trade certificate) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Certificate II | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Certificate I | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other education (including certificates or overseas qualifications not listed above) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Employment

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

- ☐ Full-time employee
☐ Part-time employee
☐ Self-employed - not employing others
☐ Self-employed - employing others
☐ Employed - unpaid worker in a family business
☐ Unemployed - seeking full-time/part-time job
☐ Not employed - not seeking employment

Agent Details

Are you applying through an Education Agent?

☐ YES ☐ NO

AGENT NAME
EMAIL
NAME OF COUNSELLOR

I nominate this agent to be my agent for the entire duration of my enrolment at SEA English Academy.

☐ YES ☐ NO

Emergency Contact

CONTACT NAME
EMAIL
PHONE NUMBER
RELATIONSHIP

Other Questions

How did you hear about SEA English Academy and our courses?

- ☐ SEA Website ☐ SEA Facebook
☐ SEA Instagram ☐ Education Agent
☐ Family or Friend ☐ Google Business Profile
☐ Others

Privacy Notice

Why do we collect your personal information?

As a CRICOS provider, we collect your personal information so we can process and manage your enrolment. Failure to provide your personal information, SEA English Academy will not be able to enrol you as a student.

How we use your personal information?

We use your personal information to enable us to deliver courses to you, and otherwise, as needed, to comply with our obligations as a CRICOS provider.

Contact information

At any time, you may contact SEA English Academy to:

- request access to your personal information
- correct your personal information
- make a complaint about how your personal information has been handled
- ask a question about this Privacy Notice

SEA English Academy

Melbourne VIC 3000
Email: admissions@sea-english.edu.au

Applicant Declaration

By signing this form, I acknowledge that I have read and understood the information provided above. I also acknowledge that I have read the requirements to be accepted in the course(s), including English language proficiency, educational qualifications or work experience to the course.

I have read through SEA English Academy website/marketing materials and am aware of all relevant information about the course(s) content, mode of study, duration, holidays, campus location and facilities, work-based training/placement (if applicable), training arrangements, assessment methods.

I agree to abide by the above terms and conditions and consent to the collection, use and disclosure of my personal information in accordance with the Privacy Notice above. The information and documents provided by me are true and correct in all respects.

APPLICANT NAME

APPLICANT SIGNATURE

DATE DD / MM / YYYY

Document Checklist for Application

| Qualification | Provided |
|---|--------------------------|
| Completed and signed Application Form | <input type="checkbox"/> |
| Copy of identification pages of your passport | <input type="checkbox"/> |
| Copy of current visa (if you are in Australia) | <input type="checkbox"/> |
| Certified copies of relevant academic records in your home country, such as high school or college/university certificates | <input type="checkbox"/> |
| Certified copies of relevant academic records in Australia, such as high school or college/university certificates (if relevant) | <input type="checkbox"/> |
| If you have completed an approved English language test such as IELTS, TOEFL or PTE, please submit the certificate, SEA English Academy will verify your English language proficiency test score online | <input type="checkbox"/> |
| If you have undertaken the PTE Academic test, you must send the scores to SEA English Academy on-line. No PDF versions of PTE Academic score can be accepted | <input type="checkbox"/> |
| Completed Placement Test | <input type="checkbox"/> |

Disability Supplement

If you indicated the presence of a disability, impairment, or long-term condition, please select the area(s) in the following list:

Disability in this context does not include short-term disabling health conditions such as a fractured leg, influenza, or corrected physical conditions such as impaired vision managed by wearing glasses or lenses.

HEARING/DEAF

Hearing impairment is used to refer to a person who has an acquired mild, moderate, severe or profound hearing loss after learning to speak, communicates orally and maximises residual hearing with the assistance of amplification. A person who is deaf has a severe or profound hearing loss from, at, or near birth and mainly relies upon vision to communicate, whether through lip reading, gestures, cued speech, finger spelling and/or sign language.

PHYSICAL

A physical disability affects the mobility or dexterity of a person and may include a total or partial loss of a part of the body. A physical disability may have existed since birth or may be the result of an accident, illness, or injury suffered later in life; for example, amputation, arthritis, cerebral palsy, multiple sclerosis, muscular dystrophy, paraplegia, quadriplegia or post-polio syndrome.

INTELLECTUAL

In general, the term 'intellectual disability' is used to refer to low general intellectual functioning and difficulties in adaptive behaviour, both of which conditions were manifested before the person reached the age of 18. It may result from infection before or after birth, trauma during birth, or illness.

LEARNING

A general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities. These disorders are intrinsic to the individual, presumed to be due to central nervous system dysfunction, and may occur across the life span. Problems in self-regulatory behaviours, social perception, and social interaction may exist with learning disabilities but do not by themselves constitute a learning disability.

MENTAL ILLNESS

Mental illness refers to a cluster of psychological and physiological symptoms that cause a person suffering or distress and which represent a departure from a person's usual pattern and level of functioning.

ACQUIRED BRAIN IMPAIRMENT

Acquired brain impairment is injury to the brain that results in deterioration in cognitive, physical, emotional or independent functioning. Acquired brain impairment can occur as a result of trauma, hypoxia, infection, tumour, accidents, violence, substance abuse, degenerative neurological diseases or stroke. These impairments may be either temporary or permanent and cause partial or total disability or psychosocial maladjustment.

VISION

This covers a partial loss of sight causing difficulties in seeing, up to and including blindness. This may be present from birth or acquired as a result of disease, illness or injury.

MEDICAL CONDITION

Medical condition is a temporary or permanent condition that may be hereditary, genetically acquired or of unknown origin. The condition may not be obvious or readily identifiable yet may be mildly or severely debilitating and result in fluctuating levels of wellness and sickness, and/or periods of hospitalisation; for example, HIV/AIDS, cancer, chronic fatigue syndrome, Crohn's disease, cystic fibrosis, asthma or diabetes.

OTHER

A disability, impairment or long-term condition which is not suitably described by one or several disability types in combination. Autism spectrum disorders are reported under this category.