

Please complete this application form carefully and completely. No sections should be left blank. The certified copies of your academic transcripts and English language assessments are attached.

Melbourne [VIC] Campus

I. PERSONAL DETAILS

Name	
Family name (as in passport)	
Given name(s) (as in passport)	
Date of birth	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other or Not Disclosed
Nationality (as per your passport)	
Place of Birth (with country code)	
Email Address	

Address in Home Country

Address	
Suburb / Town	Postcode
Country	

Address in Australia (if present)

Address	
Suburb / Town	Postcode
Country	

Emergency Contact Details

Contact Name	Phone Number
Mobile Number	Relationship

Medical Conditions

Do you have a known disability or medical condition? (If correct, copy into box) Yes No

If YES (please specify and contact our advice team)

II. PASSPORT AND VISA DETAILS

Country of Birth	
Citizenship	
Passport Number	