

International Student Application Form



* PLEASE USE CAPITAL LETTERS TO COMPLETE THIS FORM

1 Unique Student Identifier (USI): All students are required to have an USI number

If you have **USI** please specify the number here USI NO:

If you don't have you can create your USI from <http://www.usi.gov.au/> or we can help you. I will create my USI myself

I am exempted individual (exception notice required for verification)

2 Personal and Contact Details

Given Name: Family Name:

Date of Birth (DD/MM/YYYY): Gender: Male Female Indeterminate

Contact Details:

Street Address: Suburb / City:

Post Code: State:

Country: Phone:

Email: Mobile:

Emergency Contact (Contact in Australia preferable):

Name: Relationship with applicant:

Email: Phone:

From where you will apply for your Student Visa Adelaide Other (please specify location):

3 Passport and Visa Details (Attach Evidence)

Passport Number: Country of Issue:

Passport Expiry: Holding Current Australian Visa? Yes No County of Birth:

Visa Type: Student Other Visa Expiry Date:

Place of Birth: Visa Subclass:

4 Transfer from other Australian Education Provider (Attach Evidence if Required)

Are you transferring from another education provider in Australia? YES NO

If Yes, have you completed the first 6 months of your principal course? YES NO

If your first answer is YES and second one is NO then, you need a Release letter from your existing provider.

Name of The Institute:

Principle Course Name: Date Started:

5 Course Selection

For detailed information on course please see "Courses" on our website: www.jabinhopkins.edu.au or enquire at reception.

Course Name	Duration (Week)	Tuition Fees (Refer to Fees Schedule)
<input type="checkbox"/> SIT30821: Certificate III in Commercial Cookery	58	
<input type="checkbox"/> SIT40521: Certificate IV in Kitchen Management	26-90*	
<input type="checkbox"/> SIT50422: Diploma of Hospitality Management	26-104*	
<input type="checkbox"/> SIT60322: Advanced Diploma of Hospitality Management	26-130*	
<input type="checkbox"/> SIT31021: Certificate III in Patisserie	52	
<input type="checkbox"/> FBP30521: Certificate III in Baking	52	
<input type="checkbox"/> FBP40221: Certificate IV in Baking	48	
<input type="checkbox"/> ICT50220: Diploma of Information Technology	52	
<input type="checkbox"/> ICT60220: Advanced Diploma of Information Technology	52	
<input type="checkbox"/> BSB50120: Diploma of Business	52	
<input type="checkbox"/> BSB60120: Advanced Diploma of Business	52	
<input type="checkbox"/> BSB50420: Diploma of Leadership and Management	52	
<input type="checkbox"/> BSB60420: Advanced Diploma of Leadership and Management	52	

*Duration of these courses depend on the pathway or pre-existing conditions of the students.

6 Course Commencement (please select YEAR and MONTH intake. Please note intake may vary between courses)

2023 2024 Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec
 Or Specify Date (if known) (please refer to academic calendar for exact date)

7 English Proficiency & Support

Your intended course will require learning, reading, writing, oral communication & numeracy skills. These requirements may vary between the courses according to the level of study. To study at Jabin Hopkins, you will require at least one of the following: 1. IELTS 5.5 or equivalent test score. 2. ELICOS (English Language Intensive Courses for Overseas Students) Certificate or Admission in ELICOS. 3. Passed JHIT's LLN assessment according to ACSF (Australian Core Skills Framework). 4. Citizenship and Passport of one of the following English-speaking countries: UK, USA, Canada, New Zealand or Republic of Ireland. 5. Having successfully completed previous study in Australia or one or more of the countries listed above.

Please provide your details accurately to assess your LLN level that may help us to provide you extra support if needed. English Tutorial is available for those who have low English and numeracy skill.

Do you need any support with language, literacy & numeracy (LLN)? Yes No
 Is English your main language? Yes No if 'No', what is your main language?
 English Proficiency Level: Very Well Well Not Well Not at All
 If you have English Test IELTS Overall Band Score: Date Taken:

If you have no English Test or have less Score	<input type="checkbox"/> 1. Completed English Course (ELICOS) or intending to do English Course (ELICOS)
	<input type="checkbox"/> 2. Completed JHIT's LLN assessment or intending to sit for LLN assessment
	<input type="checkbox"/> 3. Completed my previous study in English or citizen of UK, USA, Canada, New Zealand or Republic of Ireland
	<input type="checkbox"/> Will sit for an English test Test Type: <input type="text"/> Date: <input type="text"/>

8 Survey/AVETMISS Information

Have you completed year 12 or Equivalent?	<input type="radio"/> YES, write the YEAR of completion (example: 2017) <input type="text"/>
	<input type="radio"/> NO, highest COMPLETED school level (ex: Y11) <input type="text"/> The Year: <input type="text"/>

Have you SUCCESSFULLY completed any of the following qualifications? NO YES (specify if yes)
 Bachelor degree or higher degree Advanced diploma or associate degree Diploma or associate diploma Certificate IV
 Certificate III Certificate II Certificate I Other

Do you have previous study or experience related to the intended course? NO YES (give details)
 Qualification: Experience:

Do you want or expect to finish the course earlier than expected time or entitled for Course Credit and or RPL?
 NO YES (if yes, please contact academic department before you start the course)

Employment Status (tick only one):
 Full Time Part Time Self Employed
 Employer Unemployed Unpaid worker in a family business
 Unemployed (seeking full-time) Unemployed (seeking part-time) Unemployed (not seeking)

Reason of Study (tick only one):
 Get a job Try for a different career Start my own business Develop my existing business
 Get a better job or promotion personal interest or self-development Other:

Are you of Aboriginal or Torres Strait Islander origin?
 No Yes, Aboriginal Yes, Torres Strait Islander

Do you consider yourself to have a disability, impairment or long-term condition? NO YES (specify if yes)
 Hearing/deaf Physical Intellectual Learning Mental illness
 Acquired brain impairment Vision Medical Condition Other :

How did you first hear about Jabin Hopkins or Are you referred by anyone?
 Google Facebook Internet Exhibition Agent Magazine Friends or Relatives
 Existing JHIT Student (write ID):

9 Overseas Student Health Cover (OSHC) Details

Do you want Jabin Hopkins to organise your OSHC?
 Yes No (If No, then you will be responsible for it)

Desired Coverage Single Family Start Date: End Date:
 If you have existing coverage, please write Provider Name:
 Membership Number: Expiry Date:
Family Cover (if any): Provide a copy of Spouse & Child's Passport and attach additional information if you have more person to cover

10 Agent's Details (If Applicable)

Company Name & Location:
 Email: Phone:

11 Airport pickup and Accommodation

Do you require airport pickup? Yes No Do you require assistance for accommodation? Yes (provide detail below) No

Length of stay (weeks): Accommodation start date:

Accommodation type Unit/Flat House Shared Accommodation Hotel/Backpackers

12 Payment of course fees

Do you intend to pay the course fee in full while enrolling?

- Yes
- No (indicate how you want to pay the course fees):
- By installment in every semester (within the first week of the semester commenced - 6 months): 2% discount
 - By installment in every term (within the first week of the term commenced - 3 months): 1% discount
 - By installment in every months (within the first week of every month): no discount

Documents Attached

- Copy of Passport (including visa pages, if applicable) Release Letter (if required)
- Copy of Year 12 or equivalent Proof of Post Secondary Education
- Proof of English Proficiency OSHC membership details (if not organised by JHIT)

I declare that all information I have provided on this form is correct and true and understand that if this is not so the application may be rejected. I also declare that I read and understood the terms and conditions in conjunction with Student Policy Handbook:

Type Student Name: Date:

Parent/Guardian Name (if student is under 18): Date:

(There are mandatory requirements for under 18 students. Please refer to Student Policy Handbook for the details)

Information collected on this form and during your enrolment is to meet our obligations under the Education Services for Overseas Students Act 2000, and the National Code 2018, and to ensure student compliance with the conditions of their visa and their obligations under Australian immigration laws generally. This information may be provided to the Australian Government and designated authorities and, if relevant, the Tuition Protection Scheme and the ESOS Authority.

Jabin Hopkins Institute of Technology operates under the VET Quality Framework and ESOS Framework. Further information can be found here: <http://www.asqa.gov.au/>

**Please Submit the Application to
Jabin Hopkins Institute of Technology at:**

**Level 2 & 4, 135 Pirie Street, SA 5000, Australia
Or email to
info@jabinhopkins.edu.au**

For more information visit www.jabinhopkins.edu.au or contact us by email at info@jabinhopkins.edu.au or call +61 8 8223 3557

OFFICE USE ONLY

Task	Performed by	Date
Application Form Checked		
Offer & Agreement Created		
Allocated Student ID No	Amount Paid for the CoE	
Payment Plan Prepared		
CoE Issued	CoE Updated in JHIT SIS	<input type="radio"/> Yes <input type="radio"/> No
PayPlan Added in System		