

# Skilled Up Institute unfold your career

RTO Number: 40471 | CRICOS Code: 03666M

## International Students Application Form

Student needs to consider this application as Expression of interest (EOI). Submission of the application is not a guarantee to get admission in your chosen course. Once your application accepted by Skilled Up, Skilled Up admission department will assess and issue letter of offer including student agreement to accept offer and sign student agreement.

### **Skilled Up Pty Ltd**

RTO # 40471 CRICOS # 03666M

Version:3.0.23



#### **International Student Application Form**

Course Details									
Which course would you like to enroll into?	<ul> <li>SIT30821 – Certificate III in Commercial Cookery (CRICOS Course Code: 109875K)</li> <li>SIT40521 – Certificate IV in Kitchen Management (CRICOS Course Code: 109551H)</li> <li>SIT50422 – Diploma of Hospitality Management (CRICOS Course Code: 111010H)</li> </ul>				SIT60322 – Advanced Diploma of Hospitality Management (CRICOS Course Code: 111011G) BSB80120 – Graduate Diploma of Management (Learning) (CRICOS Course Code: 109101A)				
Preferred start date:	As soon as po	ossible		Inta	take: Othe	۶r			
Have you ever studied before in Australia?					Yes No				
If Yes, please provide the c	details								
Do you wish to apply for <b>Credit?</b> If YES, certified copies of transcripts from previous qualifications must be provided with this form, along with a Credit Application Form. Please contact admissions (email: <u>admissions@skilledup.edu.au</u> )					☐ Yes ☐ No ☐ Maybe I'd like more information				
Do you wish to apply for Re	ecognition of Prio	r Learning?		□ Ye	′es 🗌 No				
If you indicate YES, you will be contacted to discuss this further. Or email to admissions@skilledup.edu.au					Maybe I'd like more information				
Visa details									
Do you already have an Austr	alian Visa that allows	s you to study here?	Yes No	i					
				bclass ner (please specify):					
Completed 6 months of Princip	ple Course study ( <mark>If a</mark>	applicable)	🗌 Yes	es 🗌 No					
If Clicked No, Please tick most appropriate answer Release Letter Concurrent Study Cancelled COE with emain refusal from provide to refuse giving release letter. Skilled Up requir Statutory Declaration from Student if he/she studying Concurrent study									
<b>Note:</b> If you current University Study and Willing to study with Skilled Up with Concurrent Study Please provide a Statutory declaration with your Signed Student Agreement, including your timetable.									
Personal Details									
1. Enter your full name									
Surname:									
Given names: *									
Email ID									
Phone Number									
Address			Sta	ate:VI	IC Postal Code:				
Passport No									
OSHC Insurance		Start	Date:		Expiry Date:				
					Identifier (USI), including any middle name you must write your name, including a				



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middle names, exactly as written in the identity document you choose to use for this purpose. See section on the USI in your enrolment form or for more details visit <u>https://www.usi.gov.au/students</u>										
2. Date of Birth	Date of Birth    / / (dd-mm-yyyy)    3.    Gender:          □ Male          Female									
Schooling										
4. What is your highest <b>COMPLETED</b> qualification (tick one box only)										
□ Master's	Master's          □ Bachelor         □ Year 12 or equivalent									
Year 11 or equivalent Other:										
Application Checklist Please provide a copy of the following documents with your Expression of Interest (EOI) (you will need to bring the originals to your orientation day for verification): Please tick those that you are providing.										
Valid passport Bio page copy										
Valid Student visa or VEVO Copy (if you have one)										
High School certificat	te (Year12 com	pletion certificate) or ot	her relev	ant certificates						
Proof of English Language Proficiency (Please provide IELTS or PTE or any other form of proof)										
<b>Note:</b> if you don't have ILETS or PTE or any other form of your English language proficiency. Skilled Up will Conduct English test prior to Issue eCoE to assess English Language Proficiency										
OSHC card or evidence of OSHC insurance clearly mentioned the start and end date.										
Any other relevant documents to support your application which help Skilled Up Admission team to make decision e.g. resume										
Statutory Declaration/timetable (current study) if student willing to study concurrent Study with your existing course.										
Student Application Declaration										
I declare that the information I have provided is true and correct, to the best of my knowledge and that it is my responsibility to update Skilled Up, if this information changes during my enrolment. I completed 6 months principle course from the previous provider (or provided the release letter or provided statutory declaration/timetable for concurrent study with my other course)										
I am aware of the consequences that may arise from providing false, misleading or incomplete information, including the cancellation of my enrolment or the withdrawal of any offer made by Skilled Up Pty Ltd.										
Student Signature:					Date:	/ /				
Printed Name:										
Submitting your form										

This form is to complete as Expression of Interest (EOI) to enrol in Skilled Up course. Please submit your form via email to <u>admissions@skilledup.edu.au</u> **or** drop at Skilled Up Office: Level 2, 601 Bourke St Melbourne VIC 3000.

Note: By submitting this *application form* is not a guarantee to get admission in your chosen course. Your application will be assessed within timeframe and outcome will be send to your provided email ID in this form or to your agent. For further details please read the enrolment policy and procedure (www.skilledup.edu.au).



### Agent Detail

Please provide your agent details below					
Agent Contact person Name					
Company Name					
Address and Contact No					

Office Use ONLY								
Application Received Date:	/ /	Forwarded for Assessment		Yes No	Date	/	/	
Application Approved By:				Approval D	ate	/	/	
Offer Letter (OL) & Written Ag Student	greement (WA	) Sent to	🗌 Yes 🗌 No	OL&WA Sent Date		/	1	
Student ID #								
Filling Officer Signature:		Filling Date:		/	/			
If not approved, please pro Reason	ovide							