

# Enrolment Form

## International Student



This application form is to be completed by overseas/ international students who hold or will apply for a student visa.

This form is to collect information about a prospective international student who intends to apply for an enrolment at Max Therapy Institute (MTI). MTI uses the information and a Pre-Training Review Form & Admission Checklist-International Student to assess the student's application for an enrolment. MTI uses a Pre-Training Review Form-International Student to assess the prospective student's suitability to the course and uses the result of assessment to advise the student about the training product appropriate to meeting the student's needs, taking into account each student's existing skills and competency. MTI also uses the result of Pre-Training Review and an Admission Checklist-International Student to assess whether the student's English language proficiency, educational qualifications and/ or work experience is sufficient to enable them to enter the course. MTI will apply this form to gain information from each applicant to determine suitability into the qualification/course. A Letter of Offer and Written Agreement will be provided to the student if an assessment decision is to offer an enrolment to the applicant.

Please fill it in using CAPITAL/BLOCK LETTERS and select relevant option.

<b>A. Personal Details</b>			
Single name only <input type="checkbox"/> (Select this box if you have one name only that cannot be written in the following format. Write your single name in the 'Family name section').			
Title:	<input type="checkbox"/> Miss <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Mr. <input type="checkbox"/> Other _____		
First Given Name:		Family Name (Surname):	
Second Given Name (middle)		Date of Birth (dd/mm/yyyy):	/ /
* Please write the name that you used when you applied for your Unique Student Identifier (USI), including any middle names.			
Gender (Select ONE box only):	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other		
<b>1. Contact details</b>			
<b>a. Australian Contact Details</b>			
Home phone:		Work phone:	
Mobile:		Email:	
<b>b. International Contact Details: (Home Country)</b>			
Home phone:		Work phone:	
Mobile:		Email:	
<b>2. What is the address of your usual residence?</b>			
Please provide the physical address (street number and name not post office box) where you usually reside rather than any temporary address at which you reside for training, work or other purposes before returning to your home.			
If you are from a rural area use the address from your state or territory's 'rural property addressing' or 'numbering' system as your residential street address.			
<b>a. Australian Address</b>			
Building/ property name:			
Flat/unit details:		Street or Lot Number (e.g. 205 or Lot 118):	
Street name:			
Suburb, locality or town:			
State/Territory (if applicable):		Postcode:	
Country:			
<b>b. International Address</b>			
Address:			
State/Province/Region:			
Postcode:			
Country:			
Address:			

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<b>3. Postal address (if different from above)</b>			
<b>a. Australian Postal Address</b>			
Building/ property name:			
Flat/unit details:		Street or Lot Number (e.g. 205 or Lot 118):	
Street name:			
Suburb, locality or town:			
State/Territory:		Postcode:	
<b>b. International Postal Address</b>			
Address:			
State/Province/Region:			
Postcode:			
Country:			
<b>4. Nationality Details</b>			
Nationality:		Passport Number:	
Passport Expiry Date:		Passport Issuing Country:	
Country of Birth:		Do currently hold an Australian visa?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Visa Type:		Visa Number:	
Visa Expiry Date:			
<b>5. Emergency Contact Details</b>			
<b>a. In Australia</b>			
Name:		Relationship:	
Address:			
Suburb:		State/Territory:	
Phone/Mobile:		Email:	
<b>b. Outside Australia</b>			
Name:		Relationship:	
Address:			
State/Province/Region:		Post Code:	
Phone/Mobile:		Email:	
<b>Language and cultural diversity</b>			
<b>6. In which country were you born?</b>	<input type="checkbox"/> Australia <input type="checkbox"/> Other – please specify _____		
<b>7. Do you speak a language other than English at home?</b> (If more than one language, indicate the one that is spoken most often)		<input type="checkbox"/> No, English only <input type="checkbox"/> Yes, other – please specify _____	
<b>8. Are you of Aboriginal or Torres Strait Islander origin?</b> (For persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes)		<input type="checkbox"/> No <input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Torres Strait Islander	
<b>9. Are you currently in Australia?</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Disability/Extra/Special Support Needs</b>			
<b>10. Do you consider yourself to have a disability, impairment or long-term condition?</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No – Go to question 12	
<b>11. If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list:</b> (You may indicate more than one area)		<input type="checkbox"/> Hearing/deaf <input type="checkbox"/> Acquired brain impairment <input type="checkbox"/> Physical <input type="checkbox"/> Vision <input type="checkbox"/> Intellectual <input type="checkbox"/> Medical condition <input type="checkbox"/> Learning <input type="checkbox"/> Other <input type="checkbox"/> Mental illness	

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If you have extra/special support needs and require special support, please contact 03 9640 0339

### Schooling

12. What is your highest <b>COMPLETED</b> school level? (Select ONE box only)	<input type="checkbox"/> Year 12 or equivalent	<input type="checkbox"/> Year 9 or equivalent
	<input type="checkbox"/> Year 11 or equivalent	<input type="checkbox"/> Year 8 or below
	<input type="checkbox"/> Year 10 or equivalent	<input type="checkbox"/> Never attended school – Go to question 14

13. Are you still enrolled in secondary or senior secondary education?  Yes  No

### Previous qualifications achieved

14. Have you **SUCCESSFULLY** completed any of the qualifications listed in question 15?  Yes  No - Go to question 16

15. If YES, select <b>ANY</b> applicable boxes.	<input type="checkbox"/> Bachelor degree or higher degree	<input type="checkbox"/> Certificate III (or trade certificate)
	<input type="checkbox"/> Advanced diploma or associate degree	<input type="checkbox"/> Certificate II
	<input type="checkbox"/> Diploma (or associate diploma)	<input type="checkbox"/> Certificate I
	<input type="checkbox"/> Certificate IV (or advanced certificate/technician)	<input type="checkbox"/> Other education (including certificates or overseas qualifications not listed above)

### Employment

16. Of the following categories, which <b>BEST</b> describes your current employment status? (Select ONE box only)	<input type="checkbox"/> Full-time employee	<input type="checkbox"/> Employed – unpaid worker in a family business
	<input type="checkbox"/> Part-time employee	<input type="checkbox"/> Unemployed – seeking full-time work
	<input type="checkbox"/> Self employed – not employing others	<input type="checkbox"/> Unemployed – seeking part-time work
	<input type="checkbox"/> Self employed – employing others	<input type="checkbox"/> Not employed – not seeking employment

### Study reason

17. Of the following categories, select the one which <b>BEST</b> describes the main reason you are undertaking this course/ traineeship/apprenticeship (Select ONE box only)	<input type="checkbox"/> To get a job	<input type="checkbox"/> I wanted extra skills for my job
	<input type="checkbox"/> To develop my existing business	<input type="checkbox"/> To get into another course of study
	<input type="checkbox"/> To start my own business	<input type="checkbox"/> For personal interest or self-development
	<input type="checkbox"/> To try for a different career	<input type="checkbox"/> To get skills for community/voluntary work
	<input type="checkbox"/> To get a better job or promotion	<input type="checkbox"/> Other reasons
	<input type="checkbox"/> It was a requirement of my job	

### B. Education Agent Details

Education Agent Name: Please stamp (if applicable)			
Counsellor/ Employee's Name:		Employee's Email	
Employee's Migration Agents Registration Number: (if the employee is a registered migration agent)			
Which country are you in when completing this form?			
Australian Visa Processing Centre where you will apply for your visa:		City:	
		Country:	

Where should we send the notification of your application result?  My Australian Contact Details  My International Contact Details  Agent

### C. Enrolment Details

Have you been enrolled at MTI previously?	<input type="checkbox"/> Yes <input type="checkbox"/> No Student No. (If known): _____
Are you currently enrolled with any other education provider?	<input type="checkbox"/> Yes <input type="checkbox"/> No. If Yes, please include a copy of all eCoEs with your application
USI (Unique Student Identifier):	<input type="checkbox"/> Yes <input type="checkbox"/> No USI No. (if Yes) _____

Note - If No, you can create your own USI at the USI website <https://www.usi.gov.au/> or authorise us to apply for your USI by completing the college's USI Application Form.

If you are a student undertaking nationally recognised training you must have a Unique Student Identifier (USI).

### Course Details

Please indicate the course(s) you are applying for:

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CRICOS Code	Course	Course Duration	Tuition Fee AUD	Application Fee AUD (Non-refundable)	Resource Fee AUD	Intake/Year (Jan/Apr/Jul/Oct)	Tuition Fees You Wish to Pay Before Course Commencement
<input type="checkbox"/> 102997A	General English	4 – 60 Weeks	\$200/ Study Week	\$250	\$15/week	Weekly intake Indicate number of weeks of enrolment	If enrolled more than 25 weeks <input type="checkbox"/> Only up to 50% <input type="checkbox"/> More than 50%
<input type="checkbox"/> 104517F	CHC43315 Certificate IV in Mental Health	50 Weeks	\$12,000	\$250	\$400	Intake/Year (Jan/Apr/Jul/Oct)	<input type="checkbox"/> Only up to 50% <input type="checkbox"/> More than 50%
<input type="checkbox"/> 104516G	CHC53315 Diploma of Mental Health	78 Weeks	\$18,000	\$250	\$600	Intake/Year (Jan/Apr/Jul/Oct)	<input type="checkbox"/> Only up to 50% <input type="checkbox"/> More than 50%
<input type="checkbox"/> 113179M	HLT42021 Certificate IV in Massage Therapy	38 Weeks	\$9,000	\$250	\$300	Intake/Year (Jan/Apr/Jul/Oct)	<input type="checkbox"/> Only up to 50% <input type="checkbox"/> More than 50%
<input type="checkbox"/> 113180G	HLT52021 Diploma of Remedial Massage	78 Weeks	\$18,000	\$250	\$600	Intake/Year (Jan/Apr/Jul/Oct)	<input type="checkbox"/> Only up to 50% <input type="checkbox"/> More than 50%
<input type="checkbox"/> 094611F	HLT52315 Diploma of Clinical Aromatherapy	78 Weeks	\$18,000	\$250	\$600	Intake/Year (Jan/Apr/Jul/Oct)	<input type="checkbox"/> Only up to 50% <input type="checkbox"/> More than 50%
<input type="checkbox"/> 116618B	22656VIC Advanced Diploma of Myotherapy	78 Weeks	\$18,000	\$250	\$600	Intake/Year (Jan/Apr/Jul/Oct)	<input type="checkbox"/> Only up to 50% <input type="checkbox"/> More than 50%

### D. Entry Requirements, Prior Learning & Career Goals

1. Why did you choose to enrol at MTI?			
2. Why do you wish to undertake the course?			
3. Do you meet the course entry requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> No Please provide details below.		

### Previous qualifications achieved

Qualifications (Highest Qualification First)	Institution	Country	Date of Completion

### English Proficiency

Do you hold a current certificate of English proficiency (e.g. IELTS)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	English Test Type (e.g. IELTS):	
		English Test Score:	

If you have not yet sat your exam, please indicate the exam date:

### Work History

Do you have any experience that is relevant to your chosen course?  Yes  No If yes, please specify your experience.

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Company:	Position Title:	Years of Service:
Are you willing to complete a Language, Literacy and Numeracy (LLN) assessment by the college if required? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you intend to request for a Credit Transfer or Recognition of Prior Learning (RPL)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please fill in a Credit Transfer or Recognition of Prior Learning Application Form. This is available at MTI's reception.		
Do you have digital capability to participate in online training? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you have access to a laptop or desktop computer, relevant software and technology and understand the minimum Information Technology requirements to enable you to participate in online training? <input type="checkbox"/> Yes <input type="checkbox"/> No		
4. What do you expect to achieve after completion of the course?		
5. What is your career plan?		
E. Other Information		
Overseas Student Health Cover (OSHC) Insurance Details		
Do you hold any current OSHC insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If No, do you want MTI to organise this for you?
		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Single cover <input type="checkbox"/> Couple Cover <input type="checkbox"/> Family Cover
Do you require airport pickup to be arranged by MTI? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you require accommodation to be arranged by MTI? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Payment</b> A request for payment or tuition and other fees will be made if you receive a Letter of Offer and Written Agreement. Please make your payment by bank cheque, credit card, telegraphic transfer or direct deposit into our account. MTI has no obligation until funds are cleared and an official receipt is issued.		
<ul style="list-style-type: none"> <li>• Tuition fees are fees directly related to provision of a course.</li> <li>• A student can pay full fees if the student wishes to, but the student is not required to pay more than 50% of the total tuition fees up front for the course before the student commences the course that are more than 25 weeks. MTI can require 100% of the total tuition fees for short courses of 25 weeks or less.</li> </ul>		
F. Photographs and Testimonials Consent and Release		
Please read the following statements:  MTI has the right to take or use my photographs and testimonials and to use them in any and all media worldwide including online, now and hereafter known, for Marketing purposes.  I hereby release to MTI all rights to exhibit my photographs and testimonials in print and electronic forms publicly or privately. I waive any rights, claims or interest I may have to control the use of my identity in the photographs and testimonials and agree that any use described herein may be made without compensation or my additional consideration.		
Please select the relevant box in relation to the above statements. I, the undersigned, <input type="checkbox"/> consent to and agree with the above statements. <input type="checkbox"/> do not consent to and agree with the above statements.		
G. Privacy Statement and Applicant Declaration		
<b>Privacy Notice</b> <p><u><b>Why we collect your personal information</b></u>          As a registered training organisation (RTO), we collect your personal information so we can process and manage your enrolment in a vocational education and training (VET) course with us.</p> <p><u><b>How we use your personal information</b></u>          We use your personal information to enable us to deliver VET courses to you, and otherwise, as needed, to comply with our obligations as an RTO.</p> <p><u><b>How we disclose your personal information</b></u>          We are required by law (under the <i>National Vocational Education and Training Regulator Act 2011</i> (Cth) (NVETR Act)) to disclose the personal information we collect about you to the National VET Data Collection kept by the National Centre for Vocational Education Research Ltd (NCVER). The NCVER is responsible for collecting, managing, analysing and communicating research and statistics about the Australian VET sector.          We are also authorised by law (under the NVETR Act) to disclose your personal information to the relevant state or territory training authority.</p> <p><u><b>How NCVER and other bodies handle your personal information</b></u></p>		

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NCVER will collect, hold, use and disclose your personal information in accordance with the law, including the *Privacy Act 1988* (Cth) (Privacy Act) and the NVETR Act. Your personal information may be used and disclosed by NCVER for purposes that include populating authenticated VET transcripts; administration of VET; facilitation of statistics and research relating to education, including surveys and data linkage; and understanding the VET market.

NCVER is authorised to disclose information to the Australian Government Department of Employment and Workplace Relations (DEWR), Commonwealth authorities, state and territory authorities (other than registered training organisations) that deal with matters relating to VET and VET regulators for the purposes of those bodies, including to enable:

- administration of VET, including program administration, regulation, monitoring and evaluation
- facilitation of statistics and research relating to education, including surveys and data linkage
- understanding how the VET market operates, for policy, workforce planning and consumer information.

NCVER may also disclose personal information to persons engaged by NCVER to conduct research on NCVER's behalf.

NCVER does not intend to disclose your personal information to any overseas recipients.

For more information about how NCVER will handle your personal information please refer to the NCVER's Privacy Policy at [www.ncver.edu.au/privacy](http://www.ncver.edu.au/privacy).

If you would like to seek access to or correct your information, in the first instance, please contact your RTO using the contact details listed below.

DEWR is authorised by law, including the Privacy Act and the NVETR Act, to collect, use and disclose your personal information to fulfil specified functions and activities. For more information about how DEWR will handle your personal information, please refer to the DEWR VET Privacy Notice at <https://www.dewr.gov.au/national-vet-data/vet-privacy-notice>.

### **Surveys**

You may receive a student survey which may be run by a government department or an NCVER employee, agent, third-party contractor or another authorised agency. Please note you may opt out of the survey at the time of being contacted.

### **Contact information**

At any time, you may contact Max Therapy Institute 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

### **Additional Statements**

The information collected in this form is for the purpose of processing your application with Max Therapy Institute. The information will be held by MTI in accordance with its Privacy Policy and Procedures and maybe accessed and used by people employed/ engaged by MTI.

The information may be made available to government departments and agencies in relation to the MTI's obligations under law including the Australian Skills Quality Authority (ASQA) reported under the Australian Vocational Education and Training Management Information Statistical Standards (AVETMISS).

You have a right to access and correct your personal information in accordance with privacy legislation and MTI's Privacy Policy and Procedure. For more information in relation to how student information may be used or disclosed please access MTI's Privacy Policy at: <https://www.mti.vic.edu.au/forms-and-downloads/#1621404338396-4d483ef1-414a>.

### **Applicant Declaration and Consent**

I declare that the information I have provided to the best of my knowledge is true and correct.

I declare that the information provided by me in this Enrolment Form is correct. I confirm that I have read, fully understand, and accept MTI's TERMS AND CONDITIONS and Policies and Procedures available on the college's website, and agree to be bound by them including the Fees, Charges and Refunds Policy and Procedures, and that I have the financial capacity to meet tuition fees and agree to pay fees as they become due.

I acknowledge that I have read the Privacy Notice.

I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Notice above.

Applicant Signature		Date:	
Applicant Name:			

### **Application Checklist – You must provide all documents with your application**

- All sections of the Enrolment Form have been completed
- Include all supporting documentation upon application
- Certified copy of your passport and a copy of your visa if currently available
- Certified transcripts and certified English translations of relevant academic records
- Certified evidence of English language proficiency (IELTS certificate or equivalent) or certified evidence to demonstrate English Language Proficiency
- Release Letter from another education provider (if applicable)
- Any additional documentation to support your application (e.g. resume, work certificates, references)

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**Note:** The granting of credit transfer or RPL may affect the length of your student visa. If you are applying for Credit Transfer or Recognition of Prior Learning, you will need to first discuss this with Max Therapy Institute. If RPL is a suitable option for you, you must also complete the RPL Application Form available at MTI's reception.

### Provider Offer (MTI Use Only)

**Pre-Training Review Form and Admission Checklist-International Student are to be completed.**

Using a Pre-Training Review Form-International Student, please:

- review the Student Enrolment Form especially the student's comments in questions A.10, A.11, D.1, D.2, D.3, D.4 and D.5 of the Form and if applicable the student's LLN Test result; and assess the student's suitability to the course. Please use the result of assessment to advise the student about the training product appropriate to meeting the student's needs, taking into account each student's existing skills and competency.

Using the assessment result of Pre-Training Review and an Admission Checklist-International Student, please:

1. Assess whether the student's English language proficiency, educational qualifications and/ or work experience is sufficient to enable them to enter the course.
2. Make an assessment decision if enrolment is offered to the applicant.

Attach the completed Pre-Training Review Form & Admission Checklist to this form.

A Letter of Offer and Written Agreement is to be provided to the student upon successful pre-training review and admission assessment.