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**Student Application Form (Government Funding)**

<b>Contact Details:</b>			
<b>Title: (Please tick)</b> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/>			
Surname:		Middle Name:	
First name:		Preferred Name:	
Date of Birth		Gender: (Please tick)	Male <input type="checkbox"/> Female <input type="checkbox"/>

<b>RESIDENTIAL ADDRESS</b>			
Emergency Contact Name:		Emergency Contact No:	

<b>POSTAL ADDRESS</b> (Same as Residential <input type="checkbox"/> )	

<b>CONTACT INFORMATION</b>					
Home:		Work:		Mobile:	
Email:					
Do you give Advanced education Australia permission to email you as needed for the purposes of the course's conduct?    Yes <input type="checkbox"/> No <input type="checkbox"/>					

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Qualification / unit of competency	Enrol
SIB20110 Certificate II Retail Make up and Skin Care	<input type="checkbox"/>
SHB30115 Certificate III Beauty Services	<input type="checkbox"/>
SHB40115 Certificate IV Beauty Therapy	<input type="checkbox"/>
SHB50115 Diploma of Beauty Therapy	<input type="checkbox"/>
SIB50210 Diploma of Salon Management	<input type="checkbox"/>
CHC30110 Certificate III in Early Childhood Education and Care	<input type="checkbox"/>
CHC30212 Certificate III in Aged Care	<input type="checkbox"/>
CHC40312 Certificate IV in Disability	<input type="checkbox"/>

**COMMENTS:**

Please list any questions you may have and / or any relevant personal details pertaining to your course enrolment (i.e. qualifications to be considered for RPL)

**PAYMENT METHOD**

Cheque / Money Order   
  Cash   
  Invoice   
  Direct Debit  
 Credit Card: (Details below)   
  MasterCard   
  VISA   
  Other (specify)

Card number:		VIN: (Identification on back of card)	
Card holder name:		Expiry: (mm/yy)	
Total amount:	\$	Signature:	

**PRE-COURSE EVALUATION CHECKLIST**

Country of birth:		Language other than English spoken at home:	
Year of arrival in Australia			
Place of Birth	Are you ?	<input type="checkbox"/> Australian Citizen <input type="checkbox"/> Permanent Humanitarian Visa holder <input type="checkbox"/> Permanent Resident <input type="checkbox"/> New Zealand Citizen <input type="checkbox"/> Non of the above (Please	

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			specify).....
Proficiency in English:	<input type="checkbox"/> Very well	<input type="checkbox"/> Not well	
	<input type="checkbox"/> Well	<input type="checkbox"/> Not at all	
Indigenous status:	<input type="checkbox"/> Aboriginal	<input type="checkbox"/> Torres Strait Islander	
	<input type="checkbox"/> Aboriginal and Torres Strait Islander	<input type="checkbox"/> Neither Aboriginal nor Torres Strait Islander	
Disability:	<input type="checkbox"/> No disability	<input type="checkbox"/> Yes, please specify:	
Highest school level completed:	<input type="checkbox"/> Did not go to school	<input type="checkbox"/> Completed Year 10 or equivalent	
	<input type="checkbox"/> Completed Year 8 or below	<input type="checkbox"/> Completed Year 11 or equivalent	
	<input type="checkbox"/> Completed Year 9 or equivalent	<input type="checkbox"/> Completed Year 12 or equivalent	
	Year higher school level completed:	<input type="checkbox"/> Currently in school	
In which year did you complete year 12			
Prior qualifications:	<input type="checkbox"/> No previous qualifications	<input type="checkbox"/> Certificate III	
	<input type="checkbox"/> Bachelor degree or higher degree level	<input type="checkbox"/> Certificate II	
	<input type="checkbox"/> Advanced diploma or associate degree level	<input type="checkbox"/> Certificate I	
	<input type="checkbox"/> Diploma level	<input type="checkbox"/> Miscellaneous Education	
	<input type="checkbox"/> Certificate IV		
Employment category / status:	<input type="checkbox"/> Full time employee work	<input type="checkbox"/> Unemployed – seeking part time	
	<input type="checkbox"/> Part time employee	<input type="checkbox"/> Unemployed – seeking full time work	
	<input type="checkbox"/> Employer	<input type="checkbox"/> Not employed – not seeking work	
	<input type="checkbox"/> Self-employed – not employing others		
	<input type="checkbox"/> Employed – unpaid work in a family business		
Study reason:	<input type="checkbox"/> To get a job	<input type="checkbox"/> To get a better job or promotion	
	<input type="checkbox"/> To develop my existing business	<input type="checkbox"/> It was a requirement of my job	
	<input type="checkbox"/> To start my own business	<input type="checkbox"/> I wanted extra skills for my job	
	<input type="checkbox"/> To try for a different career		
Centrelink number (CRN)		Job seeker number:	
Please write briefly about your reasons for study and how they relate to your personal goals and career path.			
Do you have any skills or work experience relevant to your chosen course of study? Yes <input type="checkbox"/> No <input type="checkbox"/>			
If yes, please describe.			

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Have you previously undertaken this style of training?    Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, was it successful? Why / why not?	
How did you find Advanced Education Australia?	<input type="checkbox"/> Word of mouth <input type="checkbox"/> Search engine <input type="checkbox"/> Forum <input type="checkbox"/> Website link <input type="checkbox"/> Print ad <input type="checkbox"/> Employer <input type="checkbox"/> Trained with previously <input type="checkbox"/> Other:
Would you like Advanced Education Australia to contact you to further discuss your enrolment?	<input type="checkbox"/> No <input type="checkbox"/> Yes, via email <input type="checkbox"/> Yes, via phone

**Please carefully read and sign the Student Indemnity Agreement on the following page before submitting the enrolment form.**

**STUDENT INDEMNITY AGREEMENT**

**IN CONSIDERATION** of the Organiser permitting me to participate in the training course I agree with it as follows:

- I UNDERSTAND** that participating in any type of training or course or activity may be present varying forms of **RISK** and possible hazards and I voluntarily **ACCEPT** the risk of damage consequent upon or arising from my entry as a student, and the use of the Organiser's facilities.
- I WILL NOT SUE** the Organisers for any negligence, tort, breach of contractual or any other legal or equitable rights howsoever caused, and this indemnity will extend to and include any damage arising from my participation in a training course and from my use of the Organiser's facilities and **I INDEMNIFY** the Organisers in respect of the same.
- I WILL** abide by the Rules and Regulations of the Organisers as to the training and to the use of the Organiser's facilities and the directions of the Organiser's officials including the right to terminate or cancel my training and the use of the Organiser's facilities at any time and for any reason.
- THE PERSONAL INFORMATION** I have supplied to the Organiser regarding my qualifications, experience and any other matter associated with the training is true and correct and I have **READ AND UNDERSTOOD** all of the clauses of this agreement before accepting the same and before my use of the Organiser's facilities or before any participation in training.
- IN THIS AGREEMENT** the following words shall respectively mean:  
  
.....the person named as such on this application form on this paper over the page.

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Advanced Education Australia, and any teachers, lecturers, instructors, directors, officers, managers, advisors, employees, agents, licensees, subcontractors, subsidiaries, holding companies, associates and assignees, or any person associated with the company in any way; the course participation venue, company in control of the venue or any company or person authorising the use of the training venue, its directors, officers, managers, advisors, employees, agents, licensees, subcontractors, subsidiaries, holding companies, associates and assignees or any person or company associated with the company or person in any way.

**"Advanced Education Australia's facilities"** - the land and buildings associated with any training or any part of the training, training resources, accommodation or training venue.

**"use of the Advanced Education Australia 's facilities"** - the use by the student or his / her attempted use of the Organiser's facilities whether such use or access is in breach of this agreement or the Organiser's Rules and Regulations or authorised or otherwise and whether intended to be so used or not.

**"damage"** - all loss or damage, costs or expenses, whether direct or indirect flowing from any legal liability, claim, demand, right of action, proceedings or judgment of whatever nature and whether arising at law or in equity and whether suffered to the person or property of the Organiser, the Student, or any other person or corporation and whether arising out of or consequent upon the negligence of the Organiser, the Student or otherwise.

**"Rules and Regulations"** - the Rules and Regulations are the Rules and Regulations relating to any Training which is available from the Organiser, and includes all amendments or alterations to the Rules and Regulations made from time to time.

I have read and understood the Student Indemnity Agreement (above).

**NAME:** \_\_\_\_\_ (Please print)

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_/\_\_\_/\_\_\_

Student Initial \_\_\_\_\_