

Read this application carefully, complete all sections and ensure that supporting documents are attached. Please write in **BLOCK LETTERS** using a blue or black pen.

|                   |                                    |                                     |              |  |
|-------------------|------------------------------------|-------------------------------------|--------------|--|
| CURRENT LOCATION: | <input type="checkbox"/> < ONSHORE | <input type="checkbox"/> < OFFSHORE | NATIONALITY: |  |
|-------------------|------------------------------------|-------------------------------------|--------------|--|

| 1. Personal Details  |  |                                   |  |                                 |   |  |   |  |  | ✕ |  |
|--|--|-----------------------------------|--|---------------------------------|---|--|---|--|--|---|--|
| TITLE:   | <input type="checkbox"/> Mr  | <input type="checkbox"/> Mrs      | <input type="checkbox"/> Miss            | <input type="checkbox"/> Ms     | GENDER:                                 | <input type="checkbox"/> M                 | <input type="checkbox"/> F                                    | DATE OF BIRTH:                                     |  |   |  |
| GIVEN NAME:  |  |                                   |  |                                 |   |  |   |  |  |   |  |
| FAMILY NAME:   |  |                                   |  |                                 |   |  |   |  |  |   |  |
| ADDRESS:   |  |                                   |  |                                 |   | SUBURB/ TOWN:                              |   |  |  |   |  |
| STATE:   |  |                                   |  | POST CODE:                      |   |  |   | COUNTRY:   |  |   |  |
| EMAIL:   |  |                                   |  |                                 |   | MOBILE NUMBER:                             |   |  |  |   |  |
| COUNTRY OF CITIZENSHIP:  |  |                                   |  |                                 |   | PHONE NUMBER:                              |   |  |  |   |  |
| COUNTRY OF BIRTH:  |  |                                   |  |                                 | PASSPORT NUMBER:                        |  |   |  |  |   |  |
| UNIQUE STUDENT IDENTIFIER (USI)  | If you have a Unique Student Identifier (USI) please specify the number: |                                   |  | <input type="checkbox"/> Yes    | <input type="checkbox"/> No             | USI NUMBER                                 |   |  |  |   |  |
| DO YOU HOLD A VALID AUSTRALIAN VISA  | <input type="checkbox"/> Yes   | <input type="checkbox"/> No       |  |                                 |   |  |   | EXPIRY DATE:                                       |  |   |  |
| Have you ever had a visa application rejected?   |  |                                   |  |                                 |   | <input type="checkbox"/> Yes               | <input type="checkbox"/> No                                   |  |  |   |  |
| If yes, when, which country and for what reason? Please provide a copy of the rejection letter or details below:   |  |                                   |  |                                 |   |  |   |  |  |   |  |
|  |  |                                   |  |                                 |   |  |   |  |  |   |  |
| Have you visited or studied in Australia previously?   | <input type="checkbox"/> Yes   | <input type="checkbox"/> No       | Have you breached any visa conditions?   | <input type="checkbox"/> Yes    | <input type="checkbox"/> No             |  |   |  |  |   |  |
| Have you ever been refused a visa for entry into Australia?  | <input type="checkbox"/> Yes   | <input type="checkbox"/> No       | If yes, please provide reason:           |                                 |   |  |   |  |  |   |  |
|  |  |                                   |  |                                 |   |  |   |  |  |   |  |
| Please provide details of family immigration history.  |  |                                   |  |                                 |   |  |   |  |  |   |  |
| Are you married?   | <input type="checkbox"/> Yes   | <input type="checkbox"/> No       | Date of marriage:                        |                                 |   |  | Please provide a certified copy of your marriage certificate. |  |  |   |  |
| Is your spouse already in Australia?   | <input type="checkbox"/> Yes   | <input type="checkbox"/> No       |  |                                 |   |  |   |  |  |   |  |
| What visa does your spouse hold?   |  |                                   |  |                                 |   |  |   |  |  |   |  |
| What is the expiry date of your spouse's visa?   |  |                                   |  |                                 |   |  |   |  |  |   |  |
| Please provide details of all dependents that will be included in your student visa application, including their date of birth.  |  |                                   |  |                                 |   |  |   |  |  |   |  |
| Name:  |  |                                   |  |                                 |   |  | Date of birth:  |  |  |   |  |
| Name:  |  |                                   |  |                                 |   |  | Date of birth:  |  |  |   |  |
| Name:  |  |                                   |  |                                 |   |  | Date of birth:  |  |  |   |  |
| If you have more than four dependents, please attach a separate sheet with any remaining dependents details.   |  |                                   |  |                                 |   |  |   |  |  |   |  |
| Have you ever been convicted of any criminal activity?   | <input type="checkbox"/> Yes   | <input type="checkbox"/> No       | If yes, please provide relevant details: |                                 |   |  |   |  |  |   |  |
|  |  |                                   |  |                                 |   |  |   |  |  |   |  |
| Do you have a disability, impairment or long term medical condition?   |  |                                   |  |                                 |   | <input type="checkbox"/> Yes               | <input type="checkbox"/> No                                   | - if <b>yes</b> Tick one or more of the following: |  |   |  |
| <input type="checkbox"/> Hearing/Deaf  | <input type="checkbox"/> Intellectual                                    | <input type="checkbox"/> Mobility | <input type="checkbox"/> Learning        | <input type="checkbox"/> Visual | <input type="checkbox"/> Mental Illness | <input type="checkbox"/> Medical Condition |   |  |  |   |  |
| Providing information about a disability or medical condition will not disadvantage your application. However, Gen Institute needs to assess if it can make reasonable adjustments to accommodate your disability or medical condition in order to advise you appropriately. In some cases, the support required may be a cost to you. |  |                                   |  |                                 |   |  |   |  |  |   |  |
| Do you have a medical or health-related issue that may prevent a student visa being issued?  |  |                                   |  |                                 |   | <input type="checkbox"/> Yes               | <input type="checkbox"/> No                                   |  |  |   |  |
| Please refer to <a href="https://immi.homeaffairs.gov.au/help-support/meeting-our-requirements/health">https://immi.homeaffairs.gov.au/help-support/meeting-our-requirements/health</a>  |  |                                   |  |                                 |   |  |   |  |  |   |  |
| If yes, please provide details:  |  |                                   |  |                                 |   |  |   |  |  |   |  |
| Have you been granted a scholarship?   | <input type="checkbox"/> Yes   | <input type="checkbox"/> No       | Scholarship name:                        |                                 |   |  |   |  |  |   |  |

|   |  |  |   |                                   |                                     |
|---|--|--|---|-----------------------------------|-------------------------------------|
| <b>2. Language and cultural diversity</b>           |  |  |   |                                   | ✕                                   |
| <b>ENGLISH LANGUAGE PROFICIENCY</b>                 |  |  |   |                                   |                                     |
| <input type="checkbox"/>                            | IELTS - 6.0 or above   | <input type="checkbox"/>                                 | TOEFL- iBT - 64 or above                      | <input type="checkbox"/>          | PTE - 50 or above                   |
| <input type="checkbox"/>                            | Other:   |  |   |                                   |                                     |
| <input type="checkbox"/>                            | I have successfully completed an English course in Australia.            |  |   |                                   |                                     |
| <input type="checkbox"/>                            | I have successfully completed a Certificate IV Level course in Australia |  |   |                                   |                                     |
| Do you speak a language other than English at home? |  | <input type="checkbox"/> Yes <input type="checkbox"/> No | If Yes : Please Specify your Language at home |                                   |                                     |
| How well do you speak English?                      |  | <input type="checkbox"/> Very Well                       | <input type="checkbox"/> Well                 | <input type="checkbox"/> Not well | <input type="checkbox"/> Not at all |

|   |  |                 |
|---|--|-----------------|
| <b>3. Select the Course for which you are filling the application</b> |  | ✕               |
| <b>COURSE CODE AND COURSE NAME</b>                                    |  | <b>DURATION</b> |
| <input type="checkbox"/>  | BSB50120 - Diploma of Business                             | 52 Weeks        |
| <input type="checkbox"/>  | BSB60120 - Advanced Diploma of Business                    | 52 Weeks        |
| <input type="checkbox"/>  | BSB50420 - Diploma of Leadership and Management            | 52 Weeks        |
| <input type="checkbox"/>  | BSB60420 - Advanced Diploma of Leadership and Management   | 52 Weeks        |
| <input type="checkbox"/>  | CPC50220 - Diploma of Building and Construction( Building) | 72 Weeks        |
| <input type="checkbox"/>  | CPC30620 - Certificate III in Painting and Decorating      | 60 Weeks        |
| <input type="checkbox"/>  | SIT30821 - Certificate III in Commercial Cookery           | 52 Weeks        |
| <input type="checkbox"/>  | SIT40521 - Certificate IV in Kitchen Management            | 64 Weeks        |
| <input type="checkbox"/>  | SIT50422 – Diploma of Hospitality Management               | 64 Weeks        |
| <input type="checkbox"/>  | SIT60322 – Advance Diploma of Hospitality Management       | 104 Weeks       |
| Preferred Start Date  |  |                 |

|  |                             |  |   |  |   |
|--|-----------------------------|--|---|--|---|
| <b>4. Educational Details</b>  |                             |  |   |  | ✕ |
| A certified copy of original transcripts of all official results must accompany this application. Please include grading system to enable interpretation of academic results. List any studies you have attempted, whether complete or incomplete. If you would like Gen Institute to consider your employment history in support of your application, please attach your curriculum vitae (résumé). Include English translations if transcript/s is not in English. |                             |  |   |  |   |
| Secondary School Studies   |                             |  |   |  |   |
| <b>MONTH/YEAR COMMENCED</b>  | <b>MONTH/YEAR COMPLETED</b> | <b>TITLE OF COURSE</b>                                   | <b>NAME AND COUNTRY OF SCHOOL</b>   |  |   |
|  |                             |  |   |  |   |
| Tertiary or post-secondary studies   |                             |  |   |  |   |
| <b>MONTH/YEAR COMMENCED</b>  | <b>MONTH/YEAR COMPLETED</b> | <b>TITLE OF COURSE</b>                                   | <b>NAME AND COUNTRY OF SCHOOL</b>   | <b>FULL/PART-TIME</b>                                    |   |
| 1  |                             |  |   |  |   |
| 2  |                             |  |   |  |   |
| 3  |                             |  |   |  |   |
| Are you applying for Credit Transfer or Recognition of Prior Learning (RPL)?   |                             | <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, you must attach a detailed Course or Unit (Subject) syllabus. Or a Statement of Attainment from other RTO |  |   |
| Have you previously been excluded or suspended from Gen Institute or any other educational institution for academic or non-academic reasons?   |                             |  |   | <input type="checkbox"/> Yes <input type="checkbox"/> No |   |
| If yes, institution and reason:  |                             |  |   |  |   |

| 5. Employment History - Provide details of your employment history in the table below (list up to four positions). |          |            |          |                       | X |
|--|----------|------------|----------|-----------------------|---|
| EMPLOYER   | POSITION | START DATE | END DATE | FULL-TIME / PART-TIME |   |
|  |          |            |          |                       |   |
|  |          |            |          |                       |   |
|  |          |            |          |                       |   |

| 6. Funds Required   |  |                           |                              |                                   | X |
|---|--|---------------------------|------------------------------|-----------------------------------|---|
| EXPENSES  | PER PERSON   | FUNDS REQUIRED            | FUNDS                        |                                   |   |
| Travel  | Applicant (One return airfare to Australia)  |                           |                              |                                   |   |
|   | Family Members (One return airfare to Australia per person)  | Number ___ x \$           |                              |                                   |   |
| Tuition Fees  | Applicant (Course Fees –annual tuition fee)  |                           |                              |                                   |   |
|   | School aged children (aged 5-8)  | \$13,502 per year         |                              |                                   |   |
| Living  | Applicant  | \$24,710 per year         |                              |                                   |   |
|   | Partner  | \$10,394 per year         |                              |                                   |   |
|   | First child  | \$4,449 per year          |                              |                                   |   |
| Health Insurance  | (Visa Length cover as listed on offer letter) If you are bringing your partner and/or children please check the applicable visa length premium at <a href="http://www.ahm.com.au">www.ahm.com.au</a> | \$ visa length cover      |                              |                                   |   |
| <b>DETAILS OF ACCESSIBLE FUNDS</b> (Please attach supporting documentation) |  |                           |                              |                                   |   |
| Funding Source eg Bank Loan, Government Sponsored, Family                   | Relationship to Applicant (if any)   | Bank Name (if Applicable) | Account Type (if applicable) | Current Balance in Local Currency |   |
|   |  |                           |                              |                                   |   |
|   |  |                           |                              |                                   |   |
|   |  |                           |                              |                                   |   |
|   |  |                           |                              |                                   |   |
| <b>Total Funds:</b>   |  |                           |                              |                                   |   |

| 7. Overseas Student Health Cover  |                                 |  |  |  | X |
|---|---------------------------------|--|--|--|---|
| Do you have current Overseas Student Health Cover (OSHC)? <input type="checkbox"/> Yes <input type="checkbox"/> No  |                                 |  |  |  |   |
| If YES, what is your Membership Number?   |                                 | OSHC expiry date:                      |  |  |   |
| If NO, what type of OSHC will you require?  | Single <input type="checkbox"/> | Couple Family <input type="checkbox"/> | I do not require OSHC <input type="checkbox"/> |  |   |
| * Single membership – covers the student only. * Couple membership – covers the student and their spouse/partner as listed on the student’s dependant visa.*<br>Family membership – covers the student and their dependants (such as their spouse/partner, and any dependent children). |                                 |  |  |  |   |

| 8. Living Costs and policies  |  | X |
|---|--|---|
| Please visit website for a guide to living costs: <a href="http://studyinaustralia.gov.au">studyinaustralia.gov.au</a> , tuition fees details: <a href="http://gen.edu.au/our-courses/">http://gen.edu.au/our-courses/</a> , for all our Policies including Refund Policy: <a href="http://gen.edu.au/apply/policies-procedures/">http://gen.edu.au/apply/policies-procedures/</a> * Applicant to note that for transfer between providers the National Code Standard 7 applies. Gen Institute Currently does not enrol student less than 18 year of age. |  |   |
| Do you understand the costs associated with studying in Australia and associated policies of Gen Institute? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>(Including the cost of tuition, living expenses, overseas student health cover and return airfares etc.)  |  |   |

|   |   |                          |  |                             |
|---|---|--------------------------|--|-----------------------------|
| <b>9. Checklist:</b> Please make sure the following are attached (if applicable): Documents not in English must be translated |   |                          |  | ✕                           |
| <input type="checkbox"/>  | Certified Passport bio-data pages   | <input type="checkbox"/> | Certified Birth Certificate                    |                             |
| <input type="checkbox"/>  | Certified IELTS (or other English Language test)  | <input type="checkbox"/> | Related work experience, if any                |                             |
| <input type="checkbox"/>  | Certified year 12 certificate   | <input type="checkbox"/> | Copy of current Australian Visa, if applicable |                             |
| <input type="checkbox"/>  | Certified copy of Marriage certificate if applicable  | <input type="checkbox"/> | Evidence of highest academic qualifications    |                             |
| <input type="checkbox"/>  | Course or unit syllabus, if you are applying for exemptions (credit transfer or RPL) or Statement of attainment |                          |  |                             |
| Do you require any language, literacy or numeracy assistance?   |   |                          | <input type="checkbox"/> Yes                   | <input type="checkbox"/> No |
| Do you require help organising accommodation? Or Temporary Accommodation  |   |                          | <input type="checkbox"/> Yes                   | <input type="checkbox"/> No |
| Do you require airport pick-up?   |   |                          | <input type="checkbox"/> Yes                   | <input type="checkbox"/> No |

|  |  |             |
|--|--|-------------|
| <b>10. Applicant's declaration</b>   |  | ✕           |
| <p>Applicant's declaration</p> <ol style="list-style-type: none"> <li>1) I declare that the information submitted with this application is true and complete. I further declare that any tertiary academic results submitted are a complete record of all results I have obtained from every tertiary institution I have attended.</li> <li>2) I acknowledge that failure to disclose my academic record may result in Gen Institute revoking an offer or terminating my studies at any stage.</li> <li>3) I authorise Gen Institute to seek verification of my academic and professional qualifications, and work experience. I understand that Gen Institute reserves the right to inform other tertiary institutions and regulatory agencies if any of the material presented to support my application is found to be false.</li> <li>4) I understand that at the time of enrolment I will be required to supply originals of all documents used to support this application.</li> <li>5) I acknowledge that Gen Institute reserves the right to alter any course, subject, admission requirement or fee without prior notice.</li> <li>6) I understand that the personal information I have provided may be released to government agencies as required by law. I further understand that it may be disclosed to third parties for the purpose of this application.</li> <li>7) I acknowledge that I have read and understand the description of the courses/s that I am applying for on Gen Institute's website.</li> <li>8) I authorise Gen Institute to access the Australian immigration Visa Entitlements Verification Online (VEVO) system at any time to obtain information on my visa status.</li> <li>9) I declare that I am a genuine temporary entrant and genuine student and that I have read and understood conditions relating to requirements outlined on <a href="http://www.immi.gov.au">www.immi.gov.au</a></li> <li>10) I am aware of the tuition and living costs of my stay in Australia and have the financial capacity to meet such costs for the duration of my course. I will make timely payments of any fees or associated costs.</li> <li>11) I understand that if I have any school-aged children or dependents accompanying me to Australia, they must attend school and I will be required to pay a full fee if they are enrolled either in a government or non-government school.</li> <li>12) I have read and understand the description of the ESOS framework made available at: <a href="https://internationaleducation.gov.au">https://internationaleducation.gov.au</a></li> <li>13) I declare that the information provided in this application and the documentation supporting it is true and complete</li> <li>14) I declare that my signature is true and correct and matches the signature in my passport.</li> <li>15) I authorise Gen Institute to apply for my "Unique Student Identifier" Number on my behalf. I hereby declare that the information provided above is true and correct to the best of my knowledge.</li> </ol> |  |             |
| <b>Declaration by applicant:</b>   |  |             |
| I (insert full name) _____ understand all of the requirements for the course and visa application and confirm that all of the information provided is true.  |  |             |
| Signature of applicant: (as in passport signature page): _____   |  | Date: _____ |

|  |  |   |                                 |                                     |   |
|--|--|---|---------------------------------|-------------------------------------|---|
| <b>11. Where did you first hear about Gen Institute?</b> |  |   |                                 |                                     | ✕ |
| <input type="checkbox"/> Agent                           | <input type="checkbox"/> Gen Institute's Website | <input type="checkbox"/> Website other than Gen Institute | <input type="checkbox"/> Friend | <input type="checkbox"/> Exhibition |   |
| <input type="checkbox"/> Advertisement                   | <input type="checkbox"/> Other :                 |   |                                 |                                     |   |

| 12. Agent's declaration – if Applicable  |  |       | ✕ |
|--|--|-------|---|
| 1) I have assessed the applicant and to the best of my knowledge the applicant is a genuine temporary entrant and genuine student as defined by Australian immigration authorities and I confirm the documents and information provided by the applicant did not disclose any conclusive grounds for rejecting the applicant's declarations that they are a genuine temporary entrant and a genuine student.<br>2) To the best of my knowledge, the applicant is genuine in making this application and has every intention of completing all programs listed in the application.<br>3) The documents which form part of this application appear to be authentic and valid. To the best of my knowledge the applicant has genuine access to the total funds required, while in Australia, to cover all travel, OSHC, tuition and living costs for themselves and their family members (if applicable).<br>4) I recommend Gen Institute proceed with the assessment for admission of this applicant.<br>5) I confirm the student has signed this application form.<br>6) I have provided the student's personal email address and residential address, as disclosed to me by the student. |  |       |   |
| Agency name:   |  |       |   |
| Agency branch office:  |  |       |   |
| Agent staff member name:   |  |       |   |
| Signature of Agent:  |  | Date: |   |

| 13. Sending your Application  | ✕ |
|---|---|
| Please send your application to:<br><b>Gen Institute Pty Ltd.,</b><br><b>Address:</b> 416-420(Basement) Collins st, Melbourne, VIC 3000. AUSTRALIA<br><b>email:</b> <a href="mailto:admissions@gen.edu.au">admissions@gen.edu.au</a> ; <b>website:</b> <a href="http://www.gen.edu.au">www.gen.edu.au</a> |   |