

SECTION A. COURSE DETAILS

Melbourne: 155-161 Boundary Road, North Melbourne VIC 3051 Adelaide: Level 2, 14 Grote Street, Adelaide SA 5000

Email: info@scei.edu.au / enroll@scei.edu.au Web: www.scei.edu.au Phone: +61 3 9602 4110

APPLICATION TO STUDY - LOCAL (ADELAIDE CAMPUS)

The following form is to be completed by local students aspiring to study with Southern Cross Education Institute (SCEI). All prospective students must complete the following form to initiate their enrolment process. Please complete the following table of information accurately, attach all relevant documents with the form (Certificates, Passport Copies etc) and return to Southern Cross Education Institute.

TERM (INTAKE): MONTH:									
COURSE/QUALIFICATION/UN				COURSES					
Which qualification/unit do you wish					1				
COURSE/UNIT TITLE	DURATION	PLEASE	REGISTRATION		MATERIALS		TUTION FEE		
		TICK	FEE	FEE	FEE FOR SERVICE PRICE	GOVERNMENT SUBSIDISED PRICE (NON CONCESSION)*	GOVERNMENT SUBSIDISED PRICE (CONCESSION)**		
22250VIC CERTIFICATE I IN EAL (ACCESS)	28 WEEKS	٦	AUD\$250.00	N/A	AUD\$3,740.00	N/A	N/A		
22251VIC CERTIFICATE II IN EAL (ACCESS)	28 WEEKS		AUD\$250.00	N/A	AUD\$3,910.00	N/A	N/A		
22255VIC CERTIFICATE III IN EAL (FURTHER STUDY)	26 WEEKS		AUD\$250.00	N/A	AUD\$3,910.00	N/A	N/A		
22258VIC CERTIFICATE IV IN EAL (FURTHER STUDY)	26 WEEKS		AUD\$250.00	N/A	AUD\$3,740.00	N/A	N/A		
BSB50215 DIPLOMA OF BUSINESS	26 WEEKS		AUD\$250.00	AUD\$350.00	AUD\$6,000.00	N/A	N/A		
BSB60215 ADVANCED DIPLOMA OF BUSINESS	33 WEEKS		AUD\$250.00	AUD\$350.00	AUD\$8,000.00	N/A	N/A		
CHC33015 CERTIFICATE III IN INDIVIDUAL SUPPORT	32 WEEKS		AUD\$250.00	AUD\$200.00	AUD\$5,500.00	N/A	N/A		
CHC43115 CERTIFICATE IV IN DISABILITY	45 WEEKS		AUD\$250.00	AUD\$250.00	AUD\$5,000.00	N/A	N/A		
CHC30113 CERTIFICATE III IN EARLY CHILDHOOD EDUCATION AND CARE*	28 WEEKS		AUD\$250.00	AUD\$250.00	AUD\$5,270.00	N/A	N/A		
CHC50113 DIPLOMA OF EARLY CHILDHOOD EDUCATION AND CARE	104 WEEKS		AUD\$250.00	AUD\$250.00	AUD\$16,000.00	AUD \$6,907.00	\$0.00		
HLT42015 CERTIFICATE IV IN MASSAGE THERAPY	39 WEEKS		AUD\$250.00	AUD\$500.00	AUD\$7,000.00	N/A	N/A		
HLT52015 DIPLOMA OF REMEDIAL MASSAGE	72 WEEKS		AUD\$250.00	AUD\$500.00	AUD\$10,000.00	N/A	N/A		
CHC52015 DIPLOMA OF COMMUNITY SERVICES	72 WEEKS		AUD\$250.00	AUD\$350.00	AUD\$12,000.00	N/A	N/A		
CHC62015 ADVANCED DIPLOMA OF COMMUNITY SECTOR MANAGEMENT	66 WEEKS		AUD\$250.00	AUD\$350.00	AUD\$10,000.00	N/A	N/A		
HLT51612 DIPLOMA OF NURSING (ENROLLED -DIVISION 2 NURSING)	80 WEEKS		AUD\$250.00	AUD\$800.00	AUD\$28,000.00 (\$24,000 COURSE FEE + \$4,000 WORK PLACEMENT FEE	N/A	N/A		
HLT61107 ADVANCED DIPLOMA OF NURSING (ENROLLED- DIVISION 2 NURSING)	26 WEEKS		AUD\$250.00	N/A	AUD\$5,000.00	N/A	N/A		

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^{*} ELIGIBILITY CRITERIA APPLY. CONTACT SCEI TO CHECK IF YOU ARE ELIGIBLE.

^{**} CONCESSION FEE APPLICABLE TO ELIGIBLE STUDENTS WHO HOLD A CURRENTHEALTH CARE CARD OR PENSIONER CONSESSION CARD OR VETRERAN AFFAIRS CONCESSION CARD.



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SECTION B: APLICANT DE	TAILS								
TITLE	FIRST NAME LAST NAME								
GENDER DMALE DFE	MALE DATE OF BIRTH / /					E-MAIL			
MOBILE	HOME NUME		HOME NUMBER	1			WORK NUMBER		
RESIDENTAL ADDRESS	UNIT NO STREET NO		STREET NO		STREET NAME		I		l
	SUBBURB		l		STATE POS			POST C	ODE
POSTAL ADDRESS (if different to residential address)	PO BOX N	PO BOX NO							
	ess)								
WHAT LANGUAGE DO YO	WHAT LANGUAGE DO YOU SPEAK AT HOME DENGLISH ONLY DOTHER (PLEASE SPECIFY)								
IF BORN OURSIDE AUSTRA	ALIA, HOW WE	LL DO	YOU SPEAK ENG	GLISH?					
□VERY WELL	□WELL		NOT WELL		□NOT A	T ALL			
ARE YOU OF ABORIGINAL	OR TORRES ST	TRAIT IS	SLANDER ORIGI	N?					
□ABORIGINAL	☐TORRES STR	AIGT ISL	ANDER	☐ ABORIO	SINAL AN	D TORRES S	TRAIGT ISLA	ANDER	□NEITHER
ARE YOU STILL ATTENDING	G SECONDARY	SCHO	OL?						
☐YES, please enter your SAC	CE number								
■NO, what level did you cor	mplete? □YEA	AR 12 □'	YEAR 11	☐YEAR 10)	□YEAR 9		YEAR 8 OR	R BELOW
YEAR YOU COMPLITE SECO	ONDARY SCHO	OL		NAME O	F SECON	DARY SCH	OOL		
PREVOUSE EDUCATION CO	OMPLITED, ticl	k ALL le	vels that apply,	you MU S	ST tick a	t least one	box		
☐ NONE	□CE	RTIFICA	TE II		☐ DIPLO	MA			
□SACE	☐ CERTIFICATE III			☐ ADVANCED DIPLOMA OR ASSOCIATE DEGREE LEVEL					EGREE LEVEL
□CERTIFICATE I	☐ CERTIFICATE IV ☐ BACHELOR DEGREE OR HIGHER LEVEL								
EMPLOYMENT STATUS									
☐ FULL-TIME (employer sub	urb)		□UNEM	PLOYED – se	eking full-ti	me work	
□PART-TIME (employer suburb))	☐UNEMPLOYED — seeking part- time work					
□SELF EMPLOYED – not employing others					JUNEMPLOYED – not seeking employment				
DO YOU HAVE A DISABILI	ITY, IMPAIRM	ENT OR	R LONG TERM C	ONDITIO	N?	□NO	<u></u>	YES, pleas	se provide details
Acquired brain impairmer	nt			□Hearing				ntellectua	al
		☐Heart /				□ Mental			
□Physical			□Vision /				Learning		
DO YOU HAVE ANY BARR	RIERS THAT MA	AY PRE	VENT YOU FROI	M SECCES	SFULLY	COMPLITI	NG YOUR	STUDY?	
☐ Learning difficulties			Transport issues				1 Unstable h		
, , ,		Ongoing regular a				□Legal issues			
☐ Financial issues			Work commitme	nts			Other, plea	ase specif	У
DO YOU HAVE ANY EXPE	RIENCE RELEV	ANT TO	THE QUALIFIC	ATION Y	OU HAV	E CHOSEN	TO UNDER	TAKE?	
□NO									
☐YES , if yes will you be ap	pplying for Reco	gnition	of Current Compe	etency (R	PL) or Cre	edit Transfer	?		
REASONS FOR STUDY?									
☐ Personal interest		☐ To develop my exis					☐ To get into another course of study		
☐ I want extra skills for my jo			To try for a differ				☐ To develop my existing business		
☐ To start my own business			To get a better jo	o or prom	iotion	L	☐ Other		



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SECTION C. ELIGIBILITY DETAILS (for subsidised training ONLY)					
RESIDENCY STATUS ☐ Australian Citizen ☐ Permanent Resident					
☐Bridging Visa (please circle) 457 495 487 489 163 164 165 188					
IF YOU ARE UNEMPLOYED, ARE YOU CURRENTLY REGISTER WITH AN EMPLOYMENT SERVICE PROVIDER?					
□YES, Name: Contact Person: Phone: Job Seeker ID: ARE YOU REGISTER WITH CENTRALINK?					
□NO					
☐YES, (provide your Customer Reference Number (CRN) and expiry date)					
DO YOU RECEIVE ANY ALLOWANCES LISTED BELOW? No Yes (tick as appropriate)					
□Newstart Allowance □ Youth Allowance □ Age Pension					
□Disability Support Pension □ Parenting payment (single/partnered)					
DO YOU HOLD ANY OF THE FOLLOWING CURRENT CONCESSION CARD? No Yes (tick as appropriate)					
☐ Health care card ☐ Pensioner concession card ☐ Concession card issued by the Department of Veteran Affairs	;				
Expiry Date: / /					
Are you currently enrolled in a training course funded by the SA Government WorkReady? ☐Yes ☐No					
D. INFORMATION ON GOVERNMENT FUNDING					
Work Ready					
For further information, contact us or visit www.skills.sa.gov.au					
Centrelink approved courses					
Our institute is a Centrelink Approved VET provider. Students may be able to access Austudy, ABSTUDY, Youth Allowance and					
Pensioner Education Supplement (PES).					
E. DOCUMENT CHECKLIST					
Have you:					
□Filled in the form completely?					
□Gather all necessary supporting information and documents for SCEI staff member to view?					
☐ Passport					
☐ Visa					
□ Concession card					
☐ Concession card					
☐ Education certificates and statements of results					
☐ Drivers License or Photo ID and proof of address					
F. STUDENT'S AGREEMENT & DECLARATION					
I understand that by completing and sending the required payment with this form I am applying for enrolment into the course indicated above and will receive more information from the Southern Cross Education Institute in relation to completing my enrolment.	·e				
information from the Southern Cross Education institute in relation to completing my enforment.					
I also understand that this is an application to study and fees associated with this application only relate to the application to study and not the enrolment fee					
Arrangement for the payment of tuition fees will be included in the ADEFOR69 Enrolment Agreement – Local (Adelaide Campus) form which will be issued once mapplication has been assessed. I understand SCEI has the right to reject my application prior to issuing ADEFOR69 Enrolment Agreement – Local (Adelaide Campu					
form.					
I understand that any offer or any subsequent enrolment in a training place (including WorkReady subsidised training), made on the basis of false of	\r				
misleading information may be withdrawn by SCEI. Where the training place is subsidised by WorkReady the training place may be withdrawn by the Minister					
for Employment, Higher Education and Skills or the relevant Minister for Commonwealth funded courses.					
Lundarstand that completion of the course Lam applying to enrol in may impact on my eligibility for subcidiced training in the future					
I understand that completion of the course I am applying to enrol in may impact on my eligibility for subsidised training in the future.					
I, have honestly and accurately completed this application form.					
THE TOTAL PARTY.					
STUDENT SIGNATURE: DATE: / /					

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FOR OFFICE USE ONLY					
This ADEFOR68 Application to study – local form received on(DATE)					
Correct and relevant supporting documents sighted, photocopied and attached to this application?					
Students eligibility and entitlement confirmed on VETA (printed and attached to this application)					
Upfront Assessment of Needs (ACER) test results attached ☐ Yes ☐ No					
Did student meet the minimum literacy and numeracy levels needed for the chosen course (please see table 1)					
☐ Yes ☐ No (if no what support has been organised for the student)					
ADEFOR251 Pre-enrolment review form attached					
Application Accepted?					
If Yes, student was notified via Letter of offer(attached) Email (attached) in person					
This application was assessed by:					
Staff Name: Date: / /					

NOTES:

TABLE 1: Minimum literacy and numeracy levels				
Course	ACER level			
Certificate II or III level	ACSF exit level 2 in reading and numeracy			
Certificate IV and above	ACSF exit level 3 reading, writing and numeracy			
Diploma of Nursing	ACSF exit level 3 working at level 4 in reading, writing and numeracy			



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