

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. Must use Legal Name only – (Please do not use Abbreviated or Alternative given Name)

1. Domestic Student – Fee Source		X
Fee for service – domestic full fee paying student <input type="checkbox"/>	Meets VTG eligibility criteria <input type="checkbox"/>	

2. Personal Details		X
Title:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of birth: (dd / mm / yyyy)
Given name:	Other / Middle name:	
Family name:		
Residential address and contact information:		Preferred Contact Method: <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Mail
Address:		
Suburb/ town:	State:	Post code:
Mobile number:	Home No:	Work No:
Email:		
If your postal address is different from the residential address provided, please state it below:		
ADDRESS / P.O. BOX:		
SUBURB/ TOWN:	STATE:	POST CODE:
Country of Birth <input type="checkbox"/> Australia <input type="checkbox"/> Other - Specify	Town/City of Birth:	
Emergency Contact Details		
Contact Name:	Relationship to you:	
Daytime Phone:	Mobile:	

3. Nationality- related information		X
Are you a citizen of Australia or Permanent resident? <input type="checkbox"/> Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> No		
Are you a Citizen of New Zealand? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you of Aboriginal? <input type="checkbox"/> Yes <input type="checkbox"/> No	or	Are you of Torres Strait Island origin? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is the main language you speak at home English? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If English is not the language you speak most often, please specify your main language:		
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		

4. Select the Course for which you are filling the application		X
COURSE CODE AND COURSE NAME (Course code / course name - If not sure ask our team member)		
Preferred Start Date:		
Are you enrolling as a trainee/apprentice? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you applying for Recognition of Prior Learning (RPL)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you applying for any Credit Transfers from previous studies? <input type="checkbox"/> Yes <input type="checkbox"/> No		
CANDIDATE REFERRAL		
Of the following categories, which best describes your main reason for undertaking this course/trainee/apprenticeship? (Tick one box only)		
<input type="checkbox"/> To get a job	<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	<input type="checkbox"/> For personal interest or self-development	
<input type="checkbox"/> To get a better job or promotion	<input type="checkbox"/> To develop my existing business	
<input type="checkbox"/> To get into another course of study	<input type="checkbox"/> Other reasons	

How did you hear about this course and Newgen Education?			
<input type="checkbox"/>	Employer/Colleague	<input type="checkbox"/>	Expo
<input type="checkbox"/>	Brochure/Flyer	<input type="checkbox"/>	Newgen Education Website
<input type="checkbox"/>	Newspaper Ad	<input type="checkbox"/>	Training Directory/Guide
<input type="checkbox"/>	Advertisement	<input type="checkbox"/>	Website other than Newgen Education
<input type="checkbox"/>		<input type="checkbox"/>	Internet
<input type="checkbox"/>		<input type="checkbox"/>	Word of Mouth
<input type="checkbox"/>		<input type="checkbox"/>	Job Network
<input type="checkbox"/>		<input type="checkbox"/>	Other

5. Educational Details		X
<p>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 Newgen Education 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.</p>		
What is your highest completed school level?		
<input type="checkbox"/>	Did not go to school	<input type="checkbox"/>
<input type="checkbox"/>	Year 8 or below	<input type="checkbox"/>
<input type="checkbox"/>	Year 9 Or Equivalent	<input type="checkbox"/>
<input type="checkbox"/>	Year 10	<input type="checkbox"/>
<input type="checkbox"/>	Year 11	<input type="checkbox"/>
<input type="checkbox"/>	Year 12	<input type="checkbox"/>
In which year did you complete that school level:		
Are you currently attending secondary school? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Since leaving school, have you successfully completed any of the below qualification/s? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If you ticked "Yes", please indicate the level of the qualification/s you have completed below and whether your qualification is: A - Australian, E - Australian Equivalent or I - International.		
<input type="checkbox"/>	A <input type="checkbox"/> E <input type="checkbox"/> I	Certificate I
<input type="checkbox"/>	A <input type="checkbox"/> E <input type="checkbox"/> I	Certificate II
<input type="checkbox"/>	A <input type="checkbox"/> E <input type="checkbox"/> I	Certificate III or Trade Certificate
<input type="checkbox"/>	A <input type="checkbox"/> E <input type="checkbox"/> I	Certificate IV or Advanced Certificate/Technician
<input type="checkbox"/>	A <input type="checkbox"/> E <input type="checkbox"/> I	Diploma or Associate Diploma
<input type="checkbox"/>	A <input type="checkbox"/> E <input type="checkbox"/> I	Advanced Diploma of Associate Degree Level
<input type="checkbox"/>	A <input type="checkbox"/> E <input type="checkbox"/> I	Bachelor Degree or Higher Degree Level
<input type="checkbox"/>	A <input type="checkbox"/> E <input type="checkbox"/> I	Certificates other than the above
<p>Note: If you have multiple Prior Education Achievement Recognition Identifiers for any one qualification, use the following priority order to determine which identifier to use. 1. A - Australian, 2. E - Australian Equivalent 3. I - International</p>		
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 Newgen Education or any other educational institution for academic or non-academic reasons? <input type="checkbox"/> Yes <input type="checkbox"/> No		

6. VICTORIAN STUDENT NUMBER		X
To be completed by all students up to 24 years old. If over 24, please go to USI Section		
Do you have or have you ever been issued a Victorian Student Number (VSN)?		
<input type="checkbox"/>	Yes, please specify:	<input type="checkbox"/>
<input type="checkbox"/>	Yes, but I don't know it	<input type="checkbox"/>
<input type="checkbox"/>	No	<input type="checkbox"/>
If you have and have provided your VSN, you do not need to complete Section 6.1 below.		
6.1 Have you attended any Victorian school since 2009 or done any training with a vocational education and Training (VET) registered training Organisation or an Adult and Community Education provider in Victoria since 2011?		
<input type="checkbox"/>	No- I have not attended a Victorian school since 2009 or a TAFE or other VET training provider since the beginning of 2011.	
<input type="checkbox"/>	Yes - I have attended a Victorian School since 2009. Most recent school attended:	
<input type="checkbox"/>	Yes - I have participated in training at a TAFE or other Training Organisation since the beginning of 2011. List the most recent training organisations with which you have participated in training in Victorian since 2011. (List up to 3 training organisations).	
1.	2.	3.
If yes, institution:		

7. UNIQUE STUDENT IDENTIFIER (USI)		X
As of January 1st 2015, all candidates undertaking VET training in Australia must have a Unique Student Identifier (USI). Do you have or have you ever been issued a USI?		
<input type="checkbox"/>	Yes, please specify:	<input type="checkbox"/>
<input type="checkbox"/>	Yes, but I don't know it	<input type="checkbox"/>
<input type="checkbox"/>	No	<input type="checkbox"/>
If you answered "No/Not sure" above, you must complete the details of ONE of the below listed forms of identification in order for Newgen Education to apply for a USI on your behalf. If this section does not apply to you and you already have an USI, please leave it blank.		
<input type="checkbox"/>	Driver's License:	State: _____ License No.: _____
<input type="checkbox"/>	Medicare Card:	Colour: <input type="checkbox"/> Green <input type="checkbox"/> Blue Card No: _____ Expiry date: _____ Reference No: _____
<input type="checkbox"/>	Passport (AUS):	Document No. _____
<input type="checkbox"/>	Birth Certificate (AU):	Registration State: _____ *Note: A copy of the birth cert must be provided. Extracts are insufficient
<input type="checkbox"/>	Certificate of Registration by Decent:	Acquisition date: _____
<input type="checkbox"/>	Citizenship Certificate:	Stock No: _____ Acquisition Date: _____
<input type="checkbox"/>	ImmiCard:	Card No: _____

8. Employment Details				X	
Which of the following best describes your current employment status? (Tick one box only)					
<input type="checkbox"/>	Full-time	<input type="checkbox"/>	Part-time		
<input type="checkbox"/>	Self-Employment- Not employing others	<input type="checkbox"/>	Employer		
<input type="checkbox"/>	Employed - Unpaid worker	<input type="checkbox"/>	Unemployed- Seeking full-time employment		
<input type="checkbox"/>	Unemployed- Seeking part-time employment	<input type="checkbox"/>	Not Employed- not seeking employment		
Which of the following classifications best describes your current or most recent occupation? (Tick one box only) Note: If never employed leave blank.					
<input type="checkbox"/>	Managers	<input type="checkbox"/>	Professionals	<input type="checkbox"/>	Technicians & Trade Workers
<input type="checkbox"/>	Community & Personal Service Workers	<input type="checkbox"/>	Clerical & Administrative Workers	<input type="checkbox"/>	Sales Workers
<input type="checkbox"/>	Machinery Operators & Drivers	<input type="checkbox"/>	Labourers	<input type="checkbox"/>	Other
Complete 8.1 or 8.2- whichever is applicable to you.					
8.1	If unemployed, are you registered with a Job Services Australia provider (JSA)? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If you ticked "Yes" above, please complete the following details:					
Provider Name:		Provider Location:			
Agent's Name:		Agents Phone No:			
Agent's Email:					
8.2	If employed, please complete the details of your employment below:				
Job Title:		Supervisor/Manager Name:			
Company Name:		Company ABN:			
Company Address:		Postcode:			
Company Phone No:		Company Email:			
How long have you worked with your current employer?		Years:		Months:	
Which of the following categories best describes the industry that you work in? (Tick one box only)					
<input type="checkbox"/>	Agriculture, Forestry & fishing	<input type="checkbox"/>	Mining	<input type="checkbox"/>	Manufacturing
<input type="checkbox"/>	Electricity, Gas, Water & Waste Services	<input type="checkbox"/>	Construction	<input type="checkbox"/>	Wholesale Trade
<input type="checkbox"/>	Retail Trade	<input type="checkbox"/>	Accommodation & Food Services	<input type="checkbox"/>	Transport, Postal & Warehousing
<input type="checkbox"/>	Information, Media & Telecommunication	<input type="checkbox"/>	Financial & Insurance Services	<input type="checkbox"/>	Rental, Hiring & Real Estate
<input type="checkbox"/>	Professional, Scientific & Technical	<input type="checkbox"/>	Administrative & Support Services	<input type="checkbox"/>	Public Administration & Safety
<input type="checkbox"/>	Education & Training	<input type="checkbox"/>	Health care & Assistance	<input type="checkbox"/>	Arts & Recreation
<input type="checkbox"/>	Other Services				

9. Training And Learning Support				X	
Are you of aboriginal/Torres Strait Island decent and require specific training and learning support? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Do you consider yourself to have a permanent or significant disability and or learning difficulties? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If you ticked "Yes" above, please indicate which disability/ies apply to you:					
<input type="checkbox"/>	Hearing/ Deaf	<input type="checkbox"/>	Physical	<input type="checkbox"/>	Intellectuals
<input type="checkbox"/>	Learning	<input type="checkbox"/>	Medical Condition		
<input type="checkbox"/>	Mental illness	<input type="checkbox"/>	Vision	<input type="checkbox"/>	Acquired Brain Impairment
<input type="checkbox"/>	Other - Specify:				
TRAINING AND LEARNING SUPPORT					
If you feel you have any training or learning needs that require additional support, please write a brief explanation below. You will be contacted by Newgen Education staff member to discuss this need in further detail.					

10. Concession				X	
Do you have a Valid - current card? <input type="checkbox"/> Yes <input type="checkbox"/> No - If you ticked "Yes" Please indicate below:					
<input type="checkbox"/>	Healthcare card	<input type="checkbox"/>	Pensioner Concession card	<input type="checkbox"/>	Job Seekers Concession Card
<input type="checkbox"/>	Veteran's Gold Card				
*Note: Holders of current concession cards as listed may be eligible for enrolment fee exemptions.					

11. Applicant's declaration

Applicant's declaration:

- 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.
- 2) I acknowledge that failure to disclose my academic record may result in Newgen Education revoking an offer or terminating my studies at any stage.
- 3) I authorise Newgen Education to seek verification of my academic and professional qualifications, and work experience. I understand that Newgen Education 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.
- 4) I understand that at the time of enrolment I will be required to supply originals of all documents used to support this application.
- 5) I acknowledge that Newgen Education reserves the right to alter any course, subject, admission requirement or fee without prior notice.
- 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.
- 7) I acknowledge that I have read and understand the description of the courses/s that I am applying for
- 8) I declare that the information provided in this application and the documentation supporting it is true and complete
- 9) I declare that my signature is true and correct and matches the signature in my passport.
- 10) I authorise Newgen Education 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.

Declaration by applicant:

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: (dd/mm/yyyy)

Candidate Print Name:

Candidate Signature:

Date: (dd/mm/yyyy)

Office Use only
To be completed by a representative of Newgen Education

Team Member: _____

I confirm that the applicant has been informed of eligibility requirements for government subsidised and training under Victorian Training Guarantee, and that the applicant is aware of the consequences arising from a false, misleading or an incomplete declaration.

Newgen Education Representative: _____

Newgen Education Representative Signature: _____

Date: _____

Referral Eligibility

Is the candidate eligible for VTG funding? Yes No

Proof of eligibility provided: Yes No

Proof of concession eligibility provider: Yes No Not Applicable

Does the candidate need to be issued a USI? Yes No

Enrolment Fee: _____

Paid Date: _____

Invoice No.: _____

Is payment plan done for candidate if not eligible for VTG funding? Yes No Not Applicable

Staff Signature: _____

Date: _____

Funding source

Meets VTG eligibility criteria

P

Fee for service – domestic full fee paying students

FF

12. Sending your application:


Please send your application to:

Newgen Education,

Address: Unit 1 108 Johnston St, Collingwood, VIC, 3066

Email: admissions@newgen.edu.au

Website: www.newgen.edu.au