CHOICE BUSINESS COLLEGE

ABN: 28 130 302 000 | Email: info@cbc.edu.au | Tel: (07) 5532 3212
National Provider Code: 41297 | CRICOS Provider Number: 03444C

Onshore International Student ☐   Offshore International Student ☐

Part A - Personal Details (1-10)

1 Surname/Family Name *(As printed on your passport)*

2 Given Name *(As printed on your passport)*

3 Title   Mr. ☐   Ms. ☐   Other ☐
               Mrs. ☐   Miss ☐

4 Preferred Name

5 Gender   Male ☐   Female ☐

6 Date of Birth   Day / Month / Year

7 Country of Birth

8 Passport Number

9 Date of expiry   / /

10 USI *(Unique Student Identifier)*

Note:

Part B - Contact Details (1-9)

1 Current Address

Suburb   State   Postcode

2 Address *(Home Country if Applicable)*   Postcode

3 Postal Address *(if Different)*   Postcode

6 Mobile

7 Email

8 Telephone   *Country code / Area code / Number*

9 Emergency Contact Details

Name	Relationship
Address	
Contact Number	Emaill

International Student Enrolment Form

Sydney
- S701, 541 Kent Street, Sydney, NSW 2000
- S602 & 603, 541 Kent Street, Sydney, NSW 2000

Melbourne
- S301, 201 Fitzroy Street, St Kilda, VIC 3182

Part C - Course Preference & Intake Details
(You May Choose More Than One Course e.g. Certificate and Diploma)

Campus   Sydney ☐   Melbourne ☐

ELICOS

		CRICOS Code	Week
○	General English (Elementary to Advanced)	098026B	○ 13 ○ 26 ○ 39 ○ 52 ○ ___ others

2026	○ 05 JAN	○ 09 FEB	○ 06 APR	○ 11 MAY
	○ 06 JUL	○ 10 AUG	○ 05 OCT	○ 09 NOV
2027	○ 04 JAN	○ 08 FEB	○ 05 APR	○ 10 MAY
	○ 05 JUL	○ 09 AUG	○ 04 OCT	○ 08 NOV

Hospitality Courses

			CRICOS Code	Week
○	SIT40521	**Certificate IV in Kitchen Management**	109493B	78

2026	○ 05 JAN	○ 06 APR	○ 06 JUL	○ 05 OCT
2027	○ 04 JAN	○ 05 APR	○ 05 JUL	○ 04 OCT

			CRICOS Code	Week
○	SIT40521	**Certificate IV in Kitchen Management**	109493B	104
	SIT50422	**Diploma of Hospitality Management** *(Package Course)*	113408C	

2026	○ 05 JAN	○ 06 APR	○ 06 JUL	○ 05 OCT
2027	○ 04 JAN	○ 05 APR	○ 05 JUL	○ 04 OCT

Business Courses

			CRICOS Code	Week
○	BSB50420	**Diploma of Leadership and Management**	104271A	52

2026	○ 05 JAN	○ 23 FEB	○ 06 APR	○ 25 MAY
	○ 06 JUL	○ 24 AUG	○ 05 OCT	○ 23 NOV
2027	○ 04 JAN	○ 22 FEB	○ 05 APR	○ 24 MAY
	○ 05 JUL	○ 23 AUG	○ 04 OCT	○ 22 NOV

			CRICOS Code	Week
○	BSB60420	**Advanced Diploma of Leadership and Management**	108281M	52

2026	○ 05 JAN	○ 23 FEB	○ 06 APR	○ 25 MAY
	○ 06 JUL	○ 24 AUG	○ 05 OCT	○ 23 NOV
2027	○ 04 JAN	○ 22 FEB	○ 05 APR	○ 24 MAY
	○ 05 JUL	○ 23 AUG	○ 04 OCT	○ 23 NOV

			CRICOS Code	Week
○	BSB80320	**Graduate Diploma of Strategic Leadership**	104491M	52

2026	○ 05 JAN	○ 16 FEB	○ 06 APR	○ 18 MAY
	○ 06 JUL	○ 17 AUG	○ 05 OCT	○ 16 NOV
2027	○ 04 JAN	○ 15 FEB	○ 05 APR	○ 17 MAY
	○ 05 JUL	○ 16 AUG	○ 04 OCT	○ 15 NOV

			CRICOS Code	Week
○	BSB50120	**Diploma of Business**	108279E	52

2026	○ 05 JAN	○ 23 FEB	○ 06 APR	○ 25 MAY
	○ 06 JUL	○ 24 AUG	○ 05 OCT	○ 23 NOV
2027	○ 04 JAN	○ 22 FEB	○ 05 APR	○ 24 MAY
	○ 05 JUL	○ 23 AUG	○ 04 OCT	○ 22 NOV

			CRICOS Code	Week
○	BSB60120	**Advanced Diploma of Business**	108280A	52

2026	○ 06 JAN	○ 23 FEB	○ 06 APR	○ 25 MAY
	○ 06 JUL	○ 24 AUG	○ 05 OCT	○ 23 NOV
2027	○ 04 JAN	○ 22 FEB	○ 05 APR	○ 24 MAY
	○ 05 JUL	○ 23 AUG	○ 04 OCT	○ 22 NOV

Part D - Visa Details (1-7)

1 Nationality

2 Do you have an Australian Visa   Yes ☐   NO ☐

3 Country of Issue *(if Yes)*

4 Visa Type *(if Yes)*   Student ☐   Visitor ☐   Other ☐

5 Do you have Overseas Student Health Cover   Yes ☐   NO ☐

6 Provider *(if Yes)*   **Number**

7 OSHC Expiry Date *(if Yes)*   Day / Month / Year   / /

Part E - English Proficiency (1-2)
(Please attach certified copy of valid test scores)

(IELTS, TOEFL, PTE)

1

Test Name	Year of Test	Score

2 **Other** *(if Applicable)*

Part F - Academic Details (1-5)
Please attach certified copies of all academic
transcripts and certificates (translated into English).

1 **What is your highest COMPLETED education level?**
(Tick ONE only)

- ○ Year 11 or equivalent
- ○ Certificate I
- ○ Certificate III
- ○ Diploma/
- ○ Associate Diploma
- ○ Bachelor Degree
- ○ Other _____

- ○ Year 12 or equivalent
- ○ Certificate II
- ○ Certificate IV
- ○ Advanced Diploma/
- ○ Associate Degree
- ○ Postgraduate Degree

2 **If you are currently enrolled in another institute please indicate:**

Institute	
Course	Expected time to complete

3 **Do you require a release from your current provider?**   Yes ☐   NO ☐

Have you been employed in the area covered by the course applied for?   Yes ☐   NO ☐

5 **Are you seeking RPL or RCC/Credit Transfer for studies completed**   Yes ☐   NO ☐

(If yes, then please download and submit with your application a completed "Course Credit/RPL Application Form")

Part H - Application Checklist
(Please attach the following documents to this application)

- ○ **Certified copies of your IELTS or English test scores score**
- ○ **Certified copies of your academic qualifications, work experience** *(if applicable)* **and Overseas Student Health Cover** *(if applicable)*
- ○ **Copy of your certified passport** *(front and back)*
- ○ **Relevant employment documentation**

OFFICE USE ONLY

ACCEPTED BY CHOICE BUSINESS COLLEGE

Part H - STUDENT DECLARATION

- *I have a genuine intention to undertake the course(s) for which I have applied*
- *I understand that by signing this application form, I may be sent a Formal Letter/s of Offer/Written Agreement Contract from Choice Business College if all of the admission requirements are met.*
- *I authorise Choice Business College to contact me by SMS,Email or phone.*
- *I authorise Chioce Business College to verify any information i have procided on this form.*
- *I understand that CBC is required to submit data sourced from this enrolment form to national VET administrative collection as a regulatory reporting requirement. The information may be used by CBC or Commonwealth and State agencies for administrative, regulatory and/or research purposes.*
- *I am aware I must abide by visa conditions throughout my enrolment period in Australia including maintaining attendance and course progress.*
- *I have genuine access to sufficient funds whilst in Australia, to meet my financial commitments to CBC and cover all tuition, Overseas Student Health Cover and living expenses for myself and any dependants.*
- *I understand Tuition and Non Tuition fees may change during my course.*
- *I have been provided with Pre-enrolment information including the Choice Business College International Student Handbook & marketing information containing: entry requirements for the course including English language, academic requirements, work experience and course credit/RPL applicable; course content, duration,qualification/s on completion, modes of study and assessment methods; Choice Business College campus locations, Choice Business College general description of facilities, equipment,learning and library resources; course related fees; the Choice Business College Refund, Deferment, Suspension and Cancellation Policies; A description of the ESOS Framework; Costs of living in Australia, Accommodation options, and obligations of schooling for any school aged dependents I may have.*
- *I am aware I can obtain additional copies of the International Student Handbook,Policies,Procedures and Marketing Information from the Choice Business College WEBSITE: www.cbc.edu.au*

Applicant Name

Applicant's Signature

	Day	Month	Year
Date	/	/	

Part I - Agent Information & Declaration

- *I have provided all relevant and required information to the applicant to enable them to make an informed decision about their chosen course*
- *I am satisfied that to the best of my knowledge the applicant has genuine intentions to complete this program and has the financial capacity to pay for the course and living expenses for the duration of the course*
- *I am aware that there are implications to Choice Business College and my agency where a student's visa is refused because they do not meet the Genuine Temporary Entrant (GTE) requirement by signing this form, I am stating that I understand the declarations above and that as far as I am aware the applicant is genunely committed to complete the course.*

Agency Name

Agent's Signature

	Day	Month	Year
Date	/	/	

AGENT STAMP