

EXPRESSION OF INTEREST FORM (DOMESTIC)

PLEASE COMPLETE ALL SECTIONS IN BLOCK LETTERS

Agent Code/Stamp



Campus Location: Melbourne Hobart

A PERSONAL DETAILS

Given name(s): _____
(as stated in your birth certificate/medicare card/passport)

Family name: _____

Date of birth* (dd/mm/yyyy): _____

Country of birth: _____

Gender: Male Female

Residential Address

Street address: _____

Suburb: _____

State: _____ Postcode: _____ Country: Australia

Telephone: () _____

Mobile: _____ Fax: () _____

Email: _____

First language: _____

Language(s) spoken at home: _____

Telephone: () _____

Mobile: _____ Fax: () _____

Email: _____

Mailing Address (if different)

Street address: _____

Suburb: _____ State: _____ Postcode: _____

Do you have any disabilities or medical conditions? Yes No

If 'Yes', please specify: _____

Will it impact your ability to study? Yes No

Do you have a Unique Student Identifier (USI) Number? Yes, please specify

No If 'No', I will create myself (please visit www.usi.gov.au), or

I authorise RGIT Australia to create on my behalf
(USI Consent Form to be provided at the time of Enrolment)

Do you have a Victorian Student Number (VSN)?

Enter your VSN Number (provided to you by most recent Victorian School/TAFE attended):

No – I have not attended a Victorian school since 2009 or a TAFE or other VET training provider since 2011

Yes – I have attended a Victorian School since 2009

Most recent school attended: _____

And/or Yes – I have participated in training at a TAFE or other training organisation since the beginning of 2011 (List up to 3 training organisations)

1. _____

2. _____

3. _____

B COURSE OF STUDY

Please list the course(s) you are applying to study at RGIT Australia.

Course Code	Name of the Course	Course Duration	Commencement Date (e.g. Oct 2019)

C REASON FOR CHOOSING THIS COURSE(S) (please tick one)

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> To get a job | <input type="checkbox"/> To try for a different career | <input type="checkbox"/> I wanted extra skills for my job | <input type="checkbox"/> Other reasons |
| <input type="checkbox"/> To develop my existing business | <input type="checkbox"/> To get a better job or promotion | <input type="checkbox"/> To get into another course of study | |
| <input type="checkbox"/> To start my own business | <input type="checkbox"/> It was a requirement of my job | <input type="checkbox"/> For personal interest or self-development | |

Where did you hear about us? Website Agents/Seminars Advertisements Friends Other: _____

If an agent/consultant referred you – my referring agent/consultant is: _____

D ENGLISH LANGUAGE PROFICIENCY

Please tick (✓) which of the following applies to you. Attach relevant evidences/ documentation to support your selections.

- English is my first language. English was the language of instruction in my secondary/tertiary studies.
- I have completed a recognised English language test - Name of the test (eg:IELTS, TOEFL): _____ Test score: _____
- Other (please specify): _____

Please make sure you refer to the specific entry requirements that apply to the course you are applying for. These requirements are detailed in the Student Prospectus and are also available on RGIT Australia's website: <https://www.rgit.edu.au/courses>. From 1 July 2018, students applying for the HLT54115 Diploma of Nursing will be required by the Nursing and Midwifery Board of Australia (NMBA), when applying for their registration, to provide a formal English language test result demonstrating achievement of the NMBA specified level of English language skills, prior to commencing the program. For more details about the NMBA's requirements, you may visit www.nursingmidwiferyboard.gov.au.

E EDUCATION HISTORY

Please provide details and documentation of your past education including the highest qualification reached or completed.

Year Completed	Name of School/Institution	State/Country	Name of Qualification	Course Duration

F EMPLOYMENT HISTORY

Please provide details and documents of your relevant employment. Attach a separate page if necessary.

Date Employed (e.g. Mar 17 – Feb 18)	Name and Country of Employer (e.g. Oakhill Education Group Australia Pty Ltd, Australia)	Position	Duties

G MEDIA CONSENT

From time to time, RGIT Australia staff may request to take photographs/videos or verbal/written interviews/testimonials of students at RGIT or at places where the student is involved in an activity. These creations may be used in a classroom or on-the-job work activities or could be published by RGIT in print, digital or broadcast media such as documents, student magazine, website, social media video channels, newsletters, displays, journals, professional development materials for trainers and marketing collateral. Staff may also at times request students provide any of the above of the students' own creation for the same purposes.

- I do consent to RGIT Australia using any of the above materials involving me for the purposes outlined above.
- I do not consent to RGIT Australia using any of the above materials involving me for the purposes outlined above.

H STUDENT DECLARATION

I confirm that I have read and understood RGIT Australia's current Student Prospectus or information provided on RGIT Australia's website (www.rgit.edu.au), which includes details and information about the course entry requirements, English entry requirements, Language, Literacy and Numeracy (LLN) requirements, and other important information about the course(s) I am applying for. I also understand the Fees Payment and Refund Policy, including an explanation of what occurs, if for some unforeseen reason, the course is not delivered.

I confirm that I am fully aware of the Fees Payment and Refund Policy,

conditions of enrolment and privacy statement as set out in RGIT Australia's Privacy Policy and Procedure, available at www.rgit.edu.au/policies, which I agree to abide by as a student at RGIT Australia.

I understand that I am not required to pay more than the initial tuition fee amount as stated on the letter of offer before the start of the course.

I declare that all information provided in this expression of interest is complete and correct. I understand that failure to provide correct information or documentation in relation to this expression of interest may result in the cancellation of my enrolment.

Signature of Student*

Signature of Parent or Legal Guardian*

Date (dd/mm/yyyy)

*Note: This expression of interest and declaration must be signed by a parent or legal guardian if the student is under 18 years of age at the time of expression of interest.

Please return this completed Expression of Interest Form to:

Street address: **28-32 Elizabeth Street, Melbourne VIC 3000, Australia**
Postal address: **GPO Box 5466, Melbourne VIC 3001**
Phone: **03 8639 9000** | Fax: **03 8639 9001**
Email: **admissions@rgit.edu.au** | Web: **www.rgit.edu.au**

Office Use only

Student File No.: _____

Expression of interest assessed by: _____