INSTITUTE OF
MANAGEMENT AND TRADE

APPLICATION & PRE-TRAINING REVIEW FORM FOR INTERNATIONAL STUDENT

PERSONAL DETAILS (including full legal name)			
Title	☐ Mr ☐ Ms ☐ Mrs ☐ Other	Family Name(s)	
Middle Name		First Name(s)	
Mobile		Date of Birth	
Gender	☐ Male ☐ Female ☐ Others	Marital Status	☐ Married ☐ Single ☐ Other
Nationality		Country of Residence	
Passport No.		Country of Issue	
Passport Date of Issue		Passport Date of Expiry	
Visa type		Visa Date of Expiry	
Visa refused for Australia or any other country?		☐ Yes ☐ No	

*CURRENT RESIDENTIAL ADDRESS			
Address *		Suburb/Town/City	
Post Code		Country *	
Email *			

OVERSEAS RESIDENTIAL ADDRESS			
Address		City	
Pincode		State	
Country			

YOUR EMERGENCY CONTACT DETAILS			
Name		Relationship	
Home Phone		Mobile Phone	
Work Phone			

*EDUCATIONAL BACKGROUND					
Your highest level of qualification COMPLETED School/College/University					
Date Achieved		Grade/Percentage		Highest Qualification Achieved	

(e.g., High School Certificate, Diploma, Bachelor, etc.) certified copies of evidence of qualifications, statement of attainment and/or results must accompany your application.

* SELECT ONE OR MORE OF THE FOLLOWING TRAINING PRODUCT/S

- ☐ CPC30220 - Certificate III in Carpentry
- ☐ CPC30620 - Certificate III In Painting & Decoration
- ☐ MEM40119 - Certificate IV in Engineering
- ☐ CPC50220 - Diploma of Building and Construction
- ☐ AUR30620 - Certificate III in Light Vehicle Mechanical Technology
- ☐ AUR40216 - Certificate IV in Automotive Mechanical Diagnosis
- ☐ AUR50216 - Diploma of Automotive Technology

*Preferred Intake (month)	
Preferred Intake	

Preferred Campus

☐ **OFFICER (Regional)**
Suite 29 / 4 Cardinia Road
Officer VIC 3809

☐ **KENSINGTON**
76-78 Smith St
Kensington VIC 3031, Australia

Do you have a USI?	
USI Details	☐ Yes ☐ No, please apply for USI on the USI website (www.usi.gov.au) and provide details to the College.

APPLYING FOR CREDIT TRANSFER?	
Do you wish to apply for Credit Transfer (CT)	◯ YES ◯ NO

If yes, please provide a certified copy of an academic transcript certificate or statement of results for these courses/units of competency you wish to apply for Credit Transfer failure to provide may result in credit transfer disapproval.

DO YOU WISH TO APPLY FOR RECOGNITION OF PRIOR LEARNING (RPL)?	
Do you wish to apply for Recognition of Prior Learning (RPL)?	◯ YES ◯ NO

If yes, you must complete RPL forms to determine your eligibility to proceed with RPL and certified copies of evidence of qualifications, work experience, statement of attainment and/or results must accompany your application.

*ENGLISH PROFICIENCY					
Name of English Proficiency Test	◯ IELTS ◯ PTE ◯ TOEFL PB ◯ TOEFL IBT ◯ CAE SCALE ◯ Others				
Test Date Achieved		Others:		Result	

SPECIAL NEEDS	
Do you have a disability, impairment or long-term medical condition that may affect your studies?	◯ YES ◯ NO

ACCOMMODATION	
Do you require accommodation?	◯ YES ◯ NO
Type of accommodation	◯ Homestay ◯ Hostel ◯ Shared Room ◯ Single Room

AIRPORT PICK-UP	
Do you require airport pick-up?	◯ YES ◯ NO
Airline Company	
Flight Number	
Arrival Date (DD/MM/YY)	

OVERSEAS STUDENT HEALTH COVER (OSHC)	
Do you require OSHC?	◯ YES ◯ NO
If YES, Type	◯ Single ◯ Couples ◯ Family

PRE-TRAINING REVIEW

INFORMATION AND INSTRUCTION FOR COURSE APPLICANTS

The Pre-training Review form assists Institute of Management and Trade (IOMT) staff and yourself to determine whether this course is the most suitable for you and to identify any support needs you may have once you commence your studies and to help you succeed in your chosen course.
The review also helps to identify skills recognition and credit transfers when applying for a vocational education course. This assists to determine your competencies, including your literacy and numeracy skills prior to you commencing the training.

Course Information	
What Course/Qualification have you applied for?	
Course title	

SKILLS RECOGNITION - Relevant Employment/Work Experience	
Have you any relevant employment or work experience?	☐ YES ☐ NO

GOALS, PREFERRED LEARNING STYLE AND ADJUSTMENTS	
1. What are your interests in this area and how do you hope this course will assist you to achieve new skills and knowledge?	
2. What existing knowledge do you have of the industry you are applying to study in?	
3. Why do you want to do this course? (Please tick all applicable)	☐ I'm progressing from a lower-level course in this area ☐ To find employment ☐ As a stepping stone to further study ☐ Required for my current employment ☐ I'm exploring career options ☐ I'm an apprentice or a trainee ☐ I want to learn more in this area for personal interest ☐ It will give me useful skills that may help me find work ☐ Other reason
4. How do you prefer to learn? (Tick one or more)	☐ Being shown how to do something, and then trying it myself with some supervision ☐ Researching, reading and discussing ☐ A mix of being shown how to do something, trying it out, and talking to someone who has done it ☐ Working with others on the same problem - I don't like doing it alone ☐ Finding information on the Internet at a time and place that suits me, so learning can fit in with my lifestyle
5. Where do you prefer to learn? (Tick one or more)	☐ Outside, doing practical things with an end result that I can see ☐ In libraries, lecture theatres and places where I can discuss, read and research ideas ☐ In a relaxed environment with lots of discussion, where I can ask the teacher when I need help or guidance ☐ In a family-friendly environment where I learn from others' life experiences ☐ At my laptop or home computer, in an online/blended environment and at a time that suits me

DIGITAL LITERACY

	Beginner	Limited	Capable	Advanced
1. How would you rate your skills in the use of digital technologies?	☐	☐	☐	☐
2. Do you regularly use any of the following digital technologies? (Tick all the applicable option/s) ☐ Smart phone ☐ Laptop/computer/notebook computer ☐ Applications Microsoft Word, Excel, PowerPoint ☐ Email Internet ☐ Other	☐ ☐ ☐ ☐ ☐	☐ ☐ ☐ ☐ ☐	☐ ☐ ☐ ☐ ☐	☐ ☐ ☐ ☐ ☐

	Strongly Agree	Agree	Neutral	Disagree	Strongly disagree
3. I am comfortable communicating with others?	☐	☐	☐	☐	☐
4. I am comfortable problem-solving on my own?	☐	☐	☐	☐	☐
5. I am comfortable learning something new?	☐	☐	☐	☐	☐
6. I am comfortable watching videos (YouTube, etc.) & using social media	☐	☐	☐	☐	☐
7. I am comfortable in creating, editing different documents.	☐	☐	☐	☐	☐
8. I am comfortable researching on the internet and sending emails.	☐	☐	☐	☐	☐
9. I am comfortable in using different applications and programs.	☐	☐	☐	☐	☐
10. Do you have access to a computer at home with a reliable internet connection to study?	☐ Yes ☐ No				

PRIVACY STATEMENT & STUDENT DECLARATION

Privacy Notice

Under the Data Provision Requirements 2012, Institute of Management and Trade (IOMT) is required to collect personal information about you and to disclose that personal information to the National Centre for Vocational Education Research Ltd (NCVER).

Your personal information (including the personal information contained on this enrolment form), may be used or disclosed by IOMT for statistical, administrative, regulatory and research purposes. Institute of Management and Trade may disclose your personal information for these purposes to:

- Commonwealth and State or Territory government departments and authorised agencies; and
- NCVER.

Personal information that has been disclosed to NCVER may be used or disclosed by NCVER for the following purposes:

- populating authenticated VET transcripts;
- facilitating statistics and research relating to education, including surveys and data linkage;
- pre-populating RTO student enrolment forms;
- understanding how the VET market operates, for policy, workforce planning and consumer information; and
- administering VET, including program administration, regulation, monitoring and evaluation.

You may receive a student survey which may be administered by a government department or NCVER employee, agent or third-party contractor or other authorised agencies. Please note you may opt out of the survey at the time of being contacted. NCVER will collect, hold, use and disclose your personal information in accordance with the Privacy Act 1988 (Cth), the National VET Data Policy and all NCVER policies and protocols (including those published on NCVER's website at www.ncver.edu.au).

Consent/authority to release information and view documents

Please be assured that any discussions held with this representative will be for the purposes of your assessment and for your skills development.

During the process we do not plan to discuss your evidence or work practices with other trainees unless we have your written permission to do so.

You are required to give permission in writing for any of these discussions or viewing of evidence to occur.

- I will be required to participate in the completion of a National Students Outcomes Survey [NCVER], during my training program.

Declaration of Information Accuracy

In signing or emailing this form I acknowledge and declare that.

- I have read and understood and consent to the privacy notice and have completed all questions and details on the enrolment forms.
- Arrangements have been made to pay all fees and charges applicable to this enrolment.
- I have read and understand the IOMT'S Information for Learners Handbook
- I declare that I have read and understood the IOMT's student handbook and their policies & procedures.
- I am 18 years of age or older or have permission to access the internet from my parent(s) or guardian(s).
- My participation in this course is subject to the right of IOMT to cancel or amalgamate courses or classes. I agree to abide by all the rules and regulations of IOMT.
- I understand and have been provided with information by IOMT in relation to Credit Transfer and Recognition of Prior Learning (RPL).
- I confirm that I have been informed about the training, assessment, and support services to be provided, and about my rights and obligations as a student at IOMT.
- I have also visited the IOMT'S website to review Training and Assessment options available to me including but not limited to duration, location, mode of delivery and work placement (if any), fees, refunds, complaints, and withdrawals.
- I authorize IOMT or its agent, in the event of illness or accident during any IOMT'S organized activity, and where emergency contact next of kin cannot be contacted within reasonable time, to seek ambulance, medical or surgical treatment at my cost.
- My academic results will be withheld until my outstanding tuition fee including application fee, material fee and other costs associated is fully paid and any property belonging to IOMT has been returned.
- I acknowledge that from time-to-time IOMT may send me information regarding course opportunities and other promotional offers and that I could opt out.
- I declare that the information I have provided to the best of my knowledge is true and correct.
- I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Notice above.

☑ I declare the information submitted on and with this form is complete and accurate in all respects. I acknowledge that the provision of incorrect information may result in the withdrawal by IOMT ("The Institute") of any place which may be offered. I agree to release and indemnify the Institute and its officers, employees, agents, partners, and contractors from and against any liability, claim, action, demand, loss, or expense (including legal costs) arising out of or in any way connected with the provision of incorrect information. I acknowledge that an LLN assessment will be undertaken to assess my suitability to the program during the enrolment process.

NAME OF APPLICANT	SIGNATURE	DATE (DD/MM/YY)

PARENT/GUARDIAN	SIGNATURE	DATE (DD/MM/YY)

***Parent/guardian consent is required for all students under the age of 18.**

Were you referred to us by an education representative?	☐ YES ☐ NO

If YES,

Name	Stamp of Representative	Signature