



Course Application Form

The following form is to be completed by students wishing to study with the Australian Institute of Translation and Interpretation P/L (AITI). All potential students must complete the following form to initiate their enrolment process. Complete the form with as much information as possible. Once completed ensure copies of all supporting documentation is returned to AITI.

APPLICANT DETAILS			
Title	Mr <input type="checkbox"/> / Ms <input type="checkbox"/> / Mrs <input type="checkbox"/> / Other (please describe):		
First Name		Family name	
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>		
Date of Birth	(dd/mm/yy) ____ / ____ / ____		
Address	No. & Street:		
	Suburb:	State:	Postcode:
Phone and Mobile	Ph:		Mob:
Email Address			
Nationality			
Country of Residence	Are you a permanent resident or citizen of Australia?		
	Yes <input type="checkbox"/> <i>If YES, please attach documented evidence</i> No <input type="checkbox"/> <i>If NO, please advise below:</i>		
Your country of permanent residence:			
Passport number (Attach copy of passport):			
Visa type: Student <input type="checkbox"/> Visitor (tourist) <input type="checkbox"/> Temporary Residency <input type="checkbox"/> Bridging <input type="checkbox"/> Other Visa <input type="checkbox"/> (please specify) _____ (Attach copy of visa page if applicable)			
If student visa: What is the name of institution issuing Certificate of Enrolment? _____ Are you currently within the first 6 months of enrolment at this institution? Yes <input type="checkbox"/> No <input type="checkbox"/> Do you require AITI to issue CoE for you? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Current Visa date of expiry	(dd/mm/yy) ____ / ____ / ____		
OSHC date of expiry (if applicable)	(dd/mm/yy) ____ / ____ / ____		

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Issue date	06/2017	Review date	06/2018	Reference to regulations	SRTO 1.7/5.1/5.2/5.3/5.4	
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Melbourne Campus:

Level 5
20 Queens Street
Melbourne VIC 3000

Adelaide Campus:

Level 1
38 Gawler Place
Adelaide SA 5000

Tel : (03) 9620 1618
Email : info@aiti.edu.au
Website : www.aiti.edu.au

WHICH CAMPUS AND COURSE(S) ARE YOU APPLYING FOR?

Melbourne Campus

Adelaide Campus

PSP50916 Diploma of Interpreting

Year: _____

Month: _____

PSP60816 Advanced Diploma of Translating

Year: _____

Month: _____

*Course commencement dates may be subject to change. Please contact AITI for detailed course commencement dates. **Please refer to www.aiti.edu.au for any course and pre-enrolment information.***

STUDY OPTIONS (please tick appropriate box)

Full Time study Part Time study(domestic students only)

Detailed timetable will be released prior to the date of course commencement.

ENGLISH LANGUAGE PROFICIENCY

Is English your first language? Yes No

IELTS/TOEFL Score(Attach copy of certificate if applicable)

Other English Language Qualifications(Attach copy of certificate if applicable)

INTAKE TEST

Bilingual Interview/Dialogue Interpreting (for DI use only)

English to Chinese Translation Passage (for ADT use only)

Office Use Only Satisfactory Unsatisfactory (further study required)

Signature of Training Coordinator or appointee:

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PREVIOUS EDUCATIONAL QUALIFICATIONS

Identify any previous qualifications that you have attained including highest level of schooling. *(Attach copies of certificates)*

Award/Qualification			
Year Awarded		Institution Attended	
Country/State			
Award/Qualification			
Year Awarded		Institution Attended	
Country/State			

EMPLOYMENT HISTORY

List any applicable work experience / employment details below

Occupation	
Organisation	
Timeframes	
Occupation	
Organisation	
Timeframes	

Please attach copy of curriculum vitae and any relevant documents.

DISABILITY

Do you consider yourself to have a disability, impairment or long-term condition that may impact on your studies? Yes *(Please see below)* No

If Yes, please indicate which of the following area(s) may impact your studies *(you may indicate more than one area)*: Hearing/Deaf Physical Vision Learning

Other *(please specify)* _____

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Website : www.aiti.edu.au**RECOGNITION OF PRIOR LEARNING/ CREDIT TRANSFER**

Do you intend to apply for Recognition of Prior Learning/Current Competency or Credit Transfer?

Yes No *If yes, please supply us with all relevant documentation, qualifications and experience and refer to our Recognition of Prior Learning and Credit Transfer Policies and Procedures available on our website.***APPLICANT DECLARATION**

I understand that by completing and sending this form I am applying for enrolment into the course indicated above and if successful in this application will receive a Letter of Offer and Offer Acceptance/Enrolment Agreement confirming my enrolment details.

I also understand that this is an application to study. Arrangement for the payment of tuition fees will be included in the 'Offer Acceptance/Enrolment Agreement' which will be issued once the application has been assessed. I understand AITI has the right to reject my application prior to issuing a 'Letter of Offer' and 'Offer Acceptance/ Enrolment Agreement'.

APPLICANT'S SIGNATURE

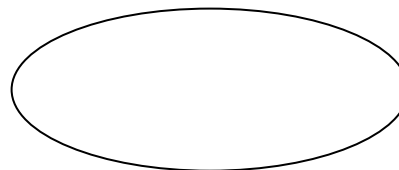
DATE _____ / _____ / _____

AGENT USE ONLY**Agent Stamp**

Agent Name: _____

Contact person: _____

Date: _____

**STUDENT AUTHORIZATION**

I hereby authorize the agent specified on this form to apply for course(s) at Australian Institute of Translation and Interpretation P/L on my behalf.

Student Name (please print): _____

Student Signature: _____

Date: _____

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