



- If you are under the age of 18 upon commencement of course, please complete Ozford CAAW form
- Please email complete application form together with supporting documents to enrolment@ozford.edu.au
- Please write clearly in black or blue ink using CAPITAL letter in English

How did you find out about Ozford? (please tick)

Search Engine
 Agent /Student Representative
 Referral
 Expo/Seminar
 Social Media *Please tick one
 () Facebook
 () Instagram
 () LinkedIn
 () YouTube
 () Other: _____

Section A: Personal Details

Family Name Date of Birth

D	D	M	M	Y	Y	Y	Y
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 Given Names Gender Male Female Indeterminate
 Marital Status Single Married Divorced Widow

Permanent Address in Home Country:

Street No Town/City
 State/Province Postcode Country:
 Telephone Mobile
 Email

Address in Australia:

Street No Street
 Suburb State Postcode:
 Telephone Mobile
 Email

Parents Contact Details:

Father Full Name Telephone
 Mother Full Name Telephone
 Email:

Emergency Contact Details:

Full Name Telephone
 Email Relationship

Section B: Citizenship and Other Information

Nationality Country of Birth First Language
 Passport No Please provide certified copy of the identification page of your passport.

- Do you currently hold any type of Australian visa? Yes No
 If yes, type of visa Expiry date:

D	D	M	M	Y	Y	Y	Y
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- Are you applying for Australian visa? Yes Type of visa: No
- Which immigration office will you lodge your visa?
- Have you been refused an entry visa to any country? Yes, please provide evidence. No
- Have you ever breach any visa conditions in any country? Yes, please provide evidence. No
- Have you been convicted of any crime or any offence in any country? Yes No



7. Do you have a known disability (e.g. Intellectual, hearing, vision) or medical conditions or require additional special assistance which may affect your study, visa application and other aspects while studying in Australia?

Yes, please complete Medical Condition Form

No

8. Are you including any dependents with you visa application?

Yes, please provide evidence.

No

Section C: Course Information

Please select one or more course(s) listed below. For entry requirements for courses, please refer to our website: www.ozford.edu.au for more information.

OZ FORD ENGLISH LANGUAGE CENTRE (CRICOS provider number: 02501G)

Course name	Duration	CRICOS No.
<input type="checkbox"/> GENERAL ENGLISH	2 weeks minimum	048142A
<input type="checkbox"/> ENGLISH FOR SECONDARY SCHOOL PREPRATION	2 weeks minimum	048143M
<input type="checkbox"/> ENGLISH FOR ACADEMIC PURPOSES	10 weeks	060426K
<input type="checkbox"/> IELTS TEST PREPARATION	10 weeks	050470M
<input type="checkbox"/> Industry Inspire (non-accredited program)	5 weeks	N/A

Start Date:

Number of weeks:

weeks

*for more information please visit: <http://www.ozford.edu.au/ozford-english-language-centre/>

OZ FORD COLLEGE (CRICOS provider number 02427A, Registered School No. 2016)

Course Level	CRICOS No.	Term 1	Term 2	Term 3	Term 4
<input type="checkbox"/> YEAR 10	045402K	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> VCE YEAR 11	045402K	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> VCE YEAR 12	045402K	<input type="checkbox"/>			
<input type="checkbox"/> VCAL	062870G			<input type="checkbox"/>	

Start Date :

2019 High school Intakes

04 Feb, 23 Apr, 15 Jul, 07 Oct

2020 High school Intakes

03 Feb, 14 Apr, 13 Jul, 05 Oct

*for more information please visit: <http://www.ozford.edu.au/high-school/>

OZ FORD INSTITUTE OF HIGHER EDUCATION (CRICOS provider number 03429B)

Course Level	CRICOS No.
<input type="checkbox"/> DIPLOMA OF BUSINESS	088194B
<input type="checkbox"/> BACHELOR OF BUSINESS	088192D
<input type="checkbox"/> BACHELOR OF BUSINESS (ACCOUNTING) * CPA/CA accredited	088193C

Start Date:

2019 Degree Intakes

04 Mar, 23 Apr, 29 Jul, 16 Sep, 18 Nov

2020 Degree Intakes

10 Mar, 27 Apr, 03 Aug, 21 Sep, 30 Nov

Section D: Credit Transfer or Recognition of Prior Learning (RPL)

Do you wish to apply for credit transfer or RPL?

Yes

No

If you have ticked yes, please provide the **credit application form** together with official transcript.

Section E: English Proficiency

Please check English entry requirements and additional requirements for the course for which you are applying.

Please provide proof of English proficiency result. Only results achieved within two years of the test date will be accepted.

<input type="checkbox"/> IELTS	Results:	<input type="text"/>	Date:	<input type="text"/>
<input type="checkbox"/> PTE	Results:	<input type="text"/>	Date:	<input type="text"/>
<input type="checkbox"/> TOEFL	Results:	<input type="text"/>	Date:	<input type="text"/>
<input type="checkbox"/> Other, please provide evidence.				

Section F: Academic History

Please check academic entry requirements and additional requirements for the course for which you are applying. Additional requirements such as a statement of purpose or an interview may be required.

Secondary Studies (High school)

Name of Qualification Institution

Date of Completion: Country

Post-secondary Studies (Diploma, Bachelor, Master degree etc) Please list most recent qualification first

Name of Qualification Institution

Date of Completion Country

Name of Qualification Institution Date of Completion

D	D	M	M	Y	Y	Y	Y
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Country Have you enrolled with Ozford before? Yes, student ID: NoAre you currently enrolled with any education provider? Yes, please provide evidence. No

Section G: Employment History

Are you currently employed? Yes No

If yes, please list most recent employment first

Company Position Date of commencement:

D	D	M	M	Y	Y	Y	Y
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End date:

D	D	M	M	Y	Y	Y	Y
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Company Position Date of commencement

D	D	M	M	Y	Y	Y	Y
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End date

D	D	M	M	Y	Y	Y	Y
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Section H: Other Services

1. Do you require airport pick up service? Yes No2. Do you require assistance with accommodation? Yes No3. Do you require Overseas Student Health Cover (OSHC)? Yes NoIf yes, please tick one Single Cover Couple Cover Family CoverCurrent OSHC expiry date: (if applicable)

D	D	M	M	Y	Y	Y	Y
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I authorise the person below to act on my behalf (if applicable)

Contact person:
Company name:
Contact details:

Section I: Declaration

I/We declare that the information provide on this form is true, correct and up-to-date. I/we agree to abide by the terms and conditions of enrolment including the refund policy, which I/we have read and understood. By paying the fees I/we agree to the terms and conditions of enrolment including refund policy. Refer to <http://www.ozford.edu.au/international-terms-and-conditions-of-enrolment/> and/or <http://www.ozford.edu.au/higher-education/international-students-terms-and-conditions/> for more information.

I /We acknowledge that the provision in incorrect information or the withholding relevant information related to my application may invalidate my application and Ozford may refuse to assess my application or withdrawn an offer.

I/We declare that I am a Genuine Temporary Entrant and that I have read and understood the requirements, rights and responsibilities of a Genuine Temporary Entrant as defined on the Australian Government website <https://www.homeaffairs.gov.au/trav/stud/more/genuine-temporary-entrant> I understand that if Ozford is of the opinion that I am not a Genuine Temporary Entrant, Ozford may refuse to assess my application or may withdraw any offer issued or cancel my enrolment.

I/We agree to abide by the regulations, policies and procedures of Ozford.

I/We have read the above conditions and understand and accept them in full.

Student's signature: _____ Date: <table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	For student under 18 years of age only Parent's signature: _____ Date: <table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
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D	D	M	M	Y	Y	Y	Y										