

INTERNATIONAL Student Enrolment

Dentos Pet Stylist Academy RTO 2875 CRICOS 01854A

STUDENT VISA

Step 1: Application for Enrolment

Download and carefully read the Handbook for International Students from our website.

Complete your Enrolment Application form indicating which course/date you are applying for and ensure that you have answered all the questions.

Sign the Application form and return it to the Pet Stylist Academy (PSA) as representative of Dentos Pet Stylist academy.

Please attach:

- copies of your academic qualifications, such as Graduate Certificate from high school, college or university (if applicable) *if they have translated into English they will need to be certified as a correct copy
- evidence of your English language proficiency *example: IELTS 4.5 for Certificate IV / IELTS 5.5 for Diploma (Upgrade) *If English is your first language, you don't need to submit any evidence.
- the front section of your passport that shows your personal details
- GTE Assessment form (If applicable)

You can submit the forms online or print the forms out and return them to The Pet Stylist Academy by email or post. Postal Address: 49 Cypress Drive, Broadbeach Waters, QLD 4218 Australia

Step 2: Letter of Offer & Acceptance Agreement

If your application is successful, you will receive a Letter of Offer along with a Letter of Offer Acknowledgement and a Student Acceptance Agreement form to be singed. These documents will explain the course that you have been accepted in, the amount of fees which you will need to pay.

You will also receive an invoice for your payment and a payment plan/s which you need to sign if you required.

Step 3: Confirmation of Enrolment

To accept the offer of a place, sign all forms and return them to PSA, and pay the amount of the initial invoice, and send proof of payment to PSA. When your payment has been verified, you will be issued an electronic Confirmation of Enrolment (eCOE) for your place on the course.

Step 4: Visa

With your Confirmation of Enrolment, you can make an application for your Student Visa through the Department of Immigration website. https://www.border.gov.au/

You can also take your eCOE to your authorized visa agent, who will advise you about your student visa application and the appropriate regulations.

When your student visa has been approved you will be eligible to come to Australia and begin your course.





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Language and culture In which country were Australia If other please specify	e you born? Other					
Do you speak a languenglish only	Other language					
Are you of Aboriginal No Yes, Torres Strait Isla	□ Yes, A	der origin? boriginal				
Disability Do you consider your Yes	rself to have a disabili No	ty, impairment or lo ⊔	ng-term condition?			
If you indicated the p Hearing/deaf Intellectual Mental illness Vision Other	Physic Learni Acquire	cal	g-term condition, please □ □	e select the	e area(s) in th	e following list:
Schooling What is the highest CC Year 12 or equivalent Year 10 or equivalent Year 8 or equivalent	☐ Year 9 or	r equivalent equivalent equivalent ended school				
In which year did you of Are you still attending sizes						
Previous qualification Have you SUCCESSFI Bachelor degree or hig Diploma (or associate I Certificate III (or trade of Certificate I	ULLY completed any of her	Advanced diploma or	Associate degree nced certificate/techniciar	n)		
Employment Of the following categor Full-time employee Self-employed Employed – unpaid wo Unemployed – seeking Unemployed – seeking Not employed – not see	☐ Part-time ☐ Employe rk in a family business g full-time work g part-time work	employee 🗆	nployment status?			
Study reason Of the following categor To get a job To start my own busine To get a better job or p I want extra skills for m For personal interest of	ess promotion ny job	☐ To develop ☐ To try for a ☐ It was a rec		e/traineeshi □ □ □ □	p/apprenticesh	ip?



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STUDENT VISA

- Please note: certified copies of original documents must be lodged with your application.
- No fees are payable with enrolment application
- We do not enrol students under 18 years age

1. APPLICANT DETAILS										
Title	Mr -	Mrs			Miss		Ms]	
Family Name										
Given Name/s										
Date of Birth: (dd/mm/yyyy)					Gend	ler	Male		Female	
Address in home country										
	City:				P	ost Code/	Zip:			
	Country:									
Mobile Number					Hom	e Phone				
Email Address										
Address in Australia										
(if already have)										
	City:				P	ost Code:				
	State:									
Nationality (as shown in passport)					_	language				
Passport Number					<u> </u>	y date				
Current Visa Number	\ - \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				Expir	y date				
USI (Unique Student Identifier	USI (Unique Student Identifier) Code (if already have)									
a standardov contract										
2. EMERGENCY CONTACT					Dalas		C4			
Name:					Relat	ionship to	Student			
Address:										
Email Address										
Mobile Number					Hom	e Phone				
Widolic Humber					110111	e i none				
3. FAMILY DETAIL										
Are any family members of yo	urs travalir	og to	□ _{YES}		□ NO					
Australia with you?	ars travem	18 10	l			olete family	member'	's deta	ails below:	
Full Name			,,,,,	.,		Date of Bi		-	/ /	/
Passport Number					-	Nationalit			, ,	<u>'</u>
Relationship						Gender:	Male		Female	
Full Name						Date of Bi		_	/	,
Passport Number						Nationality			, ,	
Relationship						Gender:	Male		Female	
Full Name						Date of Bi			/	
Passport Number						Nationality			, ,	'
Relationship						Gender:	Male		Female	
*If more than three person, pleas	e attach the	docun	nent fo	r other			iviale		remale	
ij more dian diree person, pieds	e attach the	acturi	ient jo	oner	person					



4. EDUCATION						
English Language Proficiency	English is my equivalent test		red: / / Ire required to have passed an IELTS test or It with a minimum scor <u>e of 5.5 in the last 2</u> It acceptance into this course.			
Do you intend to undertake f	urther English Tra	aining t	to reach the r	equired		
standards of Pet Stylist Acade	my?				YES NO	
*If YES, Please indicate the deta	ils below:					
Name of institution	Course Duration					
Education Background	What was your highest level of education? (ex. High school, College, University)					
Course Credit	Do you wish to claim Course Credit in a <u>particular part</u> of the course as a result of previous study, experience or recognition of a competency currently held, this includes academic credit or recognition of prior learning . Claim Credit Transfer / Recognition of Prior Learning (RPL) YES					
	and course credit policy in the handbook.					
Dataile of Course Condit						
Details of Course Credit						
requested:						
5. COURSE DETAIL						
When do you wish to start?	START YEAR	20				
	JAN / FEB / MAR / APR / MAY / JUN / JUL / AUG / SEP / OCT / NOV / DEC					
What course/s do you wish	Campus location:					
to enrol?	49 Cypress Drive, Broadbeach Waters, QLD 4218 AUSTRALIA					
Course Title (please tick all courses)				CRICOS Code	Duration	
ACM30617 Certificate III Pet Grooming				0100377	6 weeks	
ACM30417 Certificate III Companion Animal Services				0100376	20 weeks	
Dual Qualification (ACM30617 & ACM30417)				0100377 & 0100376	26 weeks	

^{*}Course duration will be varied with the course schedule



6. ARE YOU TRANSFERRING FROM OTHER PROVIDER?	Are you enrolled with another Ed YES NO	ducational	Provider?						
	*if yes, please ask for the student	transfer app	lication to com	plete and attach					
	to this form								
7. OVERSEAS STUDENT HEALTH COVER INSURANCE (OSHC)									
Would you like PSA to arrange		YES L	NO 🗆						
*OSHC provider is ahm (Australian He	ealth Management) OSHC	SINGLE	□ FAMI	LY 🗆					
If NO – Please arrange OSHC by yourself AND									
Please provide details in Student Acceptance Agreement form which we will provide you once your application is successful & Submit us the evidence: confirmation letter / copy of membership card									
application is successful & Sub	mit us the evidence: conjirmatio	n ietter / c	ору ој тетве	rsnip cara					
8. SPECIAL NEEDS									
Are there any special	Allergies								
requirements or needs that	Medical condition								
we should be aware of so	Numeracy issues								
that we may assist you in	Language difficulties								
your learning environment?	Disability or long term illness								
51	Other								
Please tick:									
YES NO NO	If you ticked any of the above b	oxes, plea	se provide det	ails:					
	. ,								
A EDUCATION ACENT	Davis have an Education Ass	-+2							
9. EDUCATION AGENT	Do you have an Education Age *If yes, please ask them to comple		ES □ NO						
	ny yes, pieuse usk them to compre		2,017						
that I have provided the applic	ne applicant on the Terms and Co cant with relevant information o 2000 and the National Code 200	n MSQ and	the course co						
Agent Name									
Contact Person									
Agent Address									
Phone Number									
Email Address									
Are you registered with Massa	ge Schools of Queensland?	YES -	NO -						
Agent Signature		Date							



10. DECLARATION

For your application for enrolment to be assessed you must complete this declaration

I declare that the information I have provided on this form and supporting documentation is true and correct. I do hereby certify that this application has been completed by me personally.

I agree that in the event I have supplied false, misleading or inaccurate information that PSA reserves the right to refuse, vary or terminate the student enrolment application.

I further acknowledge that I have the financial capacity to pay my college fees and living expenses as and when they become due.

Sharing personal information: I understand and agree and consent that my personal information may be made available to the relevant agencies i.e. Department of Immigration and Border Protection (DIBP), Australian Skills Quality Authority (ASQA), Tuition Protection Service (TPS) Director and the Health Insurance Provider pursuant to obligations under the ESOS Act 2000, the ESOS Regulations Act 2001 and the National Code 2007 or their successors and to any staff or contractor(s) employed or engaged by PSA to provide advice or services in connection with PSA registration and/or compliance.

PSA will not provide or disclose to any outside parties' personal information other than is approved in this application. However, if required by law to disclose such information then this information will be released.

I further consent to being contacted by PSA and/or the relevant Commonwealth agency in connection with my enrolment and future studies.

I nominate the Education Agent detailed in this document to be my Education Agent in further dealings with this college.

Note to applicant: You may access your personal information by contacting the Manager of Student Relations; your personal details may be edited and corrected if required.

Student Name:	
Student Signature:	Date: / /

Once you have completed this form, attach the associated documents. Please forward to: The Pet Stylist Academy (PSA)

If you are selected for acceptance into your chosen course, you will receive a Letter of Offer and a Student Acceptance Agreement. These forms must be completed and returned with applicable fees and supporting documentation. Once this is completed, upon final approval a Confirmation of Enrolment (CoE) will be provided.