



STUDENT APPLICATION FORM

SECTION A – PERSONAL INFORMATION

PERSONAL DETAILS					
Title:	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Miss	<input type="checkbox"/> Other
Gender:	<input type="checkbox"/> Female		<input type="checkbox"/> Male		<input type="checkbox"/> Other
Student Name:	Given Name		Surname		
Date of Birth:	DD / MM / YYYY				
Nationality:			Country of Birth:		
Home address:	Line 1				
	Line 2				
Mobile/Telephone:	e.g. 0400 000 000		Email:	email@domain.com	
EMERGENCY CONTACT DETAILS:					
Name:			Relationship:		
Mobile/Telephone:	e.g. 0400 000 000		Email:	email@domain.com	
AGENT/SCHOOL INFORMATION					
Agent/School Name:					
Consultant Name:					
Country of Origin:					

SECTION B – ONLINE PROGRAM SELECTION

Online Brighten Careers Institute (BCI) Course with TAFE NSW English Programs.

* Pre-requisite for Brighten Careers Institute Short Courses includes: 2 TAFE NSW English programs.

** Place a tick next to the TAFE NSW Programs (✓) and select one TAFE NSW programs to study alongside your course.

PROGRAM PACKAGE	COMPULSORY PROGRAMS	TAFE NSW PROGRAMS	DURATION
<input type="checkbox"/> Health Care	BCI Introduction to the Australian Health System TAFE World Wide English	<input type="checkbox"/> English for Health Professionals: Doctors <input type="checkbox"/> English for Health Professionals: Nurses <input type="checkbox"/> Workplace Communication Skills	6 Months
<input type="checkbox"/> Hospitality	BCI Hospitality TAFE World Wide English	<input type="checkbox"/> English for Hospitality <input type="checkbox"/> Workplace Communication Skills	6 Months
<input type="checkbox"/> Business	BCI Business Fundamentals TAFE World Wide English	<input type="checkbox"/> Workplace Communication Skills	6 Months
<input type="checkbox"/> Sales & Marketing	BCI Sales & Marketing TAFE World Wide English	<input type="checkbox"/> English for Hospitality <input type="checkbox"/> Workplace Communication Skills	6 Months



ADDITIONAL PROGRAM SELECTION

Do you want to study other TAFE NSW English Programs than the selected ones? YES NO

* You can study other English programs than the selected. Place a tick next to the TAFE NSW Programs you wish to study (v).

** Additional charges may apply.

- Workplace Communication Skills English for Hospitality
 English for Health Professionals: Doctors English for Health Professionals: Nurses

ONLINE INTAKE DATE

Please indicate a preferred date to commence your online program.

* Online intakes will commence every Monday.

PREFERRED START DATE: _____ DD / MM / YYYY

SECTION C – STUDENT INFORMATION

ENGLISH LEVEL OF PROFICIENCY

Q1. Do you speak a language other than English at home? (The language you speak most often)

- No, English only. Yes, I speak _____ Please specify

Q2. How well do you speak English (Tick)

- Very Well (1) Well (2) Not Well (3) Not at all (4)

Health Condition

Q3. Do you identify yourself as having a disability, impairment or long-term condition? (Please select all that apply)

- Yes No
 Hearing/deaf Vision
 Physical Mental Illness
 Intellectual Medical condition
 Learning Other _____

PREVIOUS STUDIES

Q4. Are you still at school?

- Yes, I am. No, I am not.

Q5. What is your HIGHEST COMPLETED school level?

* Please indicate the highest level achieved. This may include any course that you have started but did not complete after leaving secondary school.

_____ e.g. universities and colleges

SECTION D – MARKETING INFORMATION

MARKETING INFORMATION

Where and how did you first hear about Brighten Careers Institute? (Select all that apply)

- Online Search _____ Social Media _____
 Email Communication Exhibition/Seminar
 Advertising (Print/Online) Referral by Friend/Relative



SECTION E – APPLICATION CHECKLIST

APPLICATION CHECKLIST

- Completed all sections of the enrolment form
 Signed Student Handbook Declaration Form
 Copies of your IDs (e.g. Photo ID / Passport)

SECTION F – PAYMENT PLAN

PAYER INFORMATION

Please identify the person/organisation who is responsible for the payment of the course fees.

- Myself – Go to Q11.
 My Agent/School (e.g. university, college or institute) – Go to Section G.

PAYMENT METHOD

Please specify the preferred payment method.

- Direct Deposit
 Credit Card
 Electronic Fund Transfer

SECTION G – CONSENT

PAYMENT TERMS & CONDITIONS

I understand the payment terms and conditions in the Student Booklet including:

- Payments for Brighten Careers Institute package courses incur a 40% non-refundable cancellation cost.
 Payments for Brighten Careers Institute Professional Skills Development Program incur a \$500 non-refundable cancellation cost.

PRIVACY STATEMENT

BCI is subject to the Privacy and Personal Information Protection Act 1998 (NSW) and the Health Records and Information Privacy Act 2002 (NSW). BCI also collects your personal information and, in some circumstances, formation regarding your health to assist in the assessment of your application and, if you are successful, offering you a course place and recording your acceptance of that offer.

The other purpose of collection includes corresponding with you, attending to day-to-day administrative matters, informing you about your courses and other aspects of admissions or enrolment and complying with legislative reporting requirements.

I authorise BCI to provide my personal information, including my contact details and enrolment details, to third parties in accordance with BCI's Privacy Policy.

These third parties include:

- Government departments (such as the Department of Education and Training)
- External organisations (such as other tertiary educations institutions) where disclose is necessary to verify your previous qualifications and other supporting documentation provided with your application.
- Contracted service providers which BCI uses to provide services on its behalf here as required by law.

I authorise BCI to provide my personal information, including my contact details and enrolment details, to the Australian Government's designated authorities. Furthermore, I understand that any conditions concerning an offer of admissions will be contained in my letter of offer from BCI, which I will be required to read and sign.

DECLARATION

I declare the information I have supplied on this form is, to the best of my understanding and belief, complete and correct. Additionally, I understand that giving false or incomplete information may lead to my application being refused or my enrolment cancelled.

It is an offence to submit fraudulent documentation in support of my application. If fraudulent documentation is detected:

- My application will be rejected,
- If an offer has been made, it will be withdrawn



- Other relevant authorities (such as the NSW Police and the Independent Commission against Corruption) may also be notified.

I have read and understood the relevant program information in the BCI flyers and or on the BCI website and I have sufficient information about BCI to enrol.

I understand that BCI fees may increase and I accept liability for payment of all fees as explained to me. I have read and understood information regarding the costs related to studying at BCI. I have understood and accept the Terms and Conditions of enrolment at BCI. I have understood that BCI may, by written notice, vary its conditions as may be necessary to comply with any law or regulation, or amendment of any law or regulation of the Commonwealth of Australia or the State of New South Wales. I have given permission for BCI to obtain official records from an educational institution attended by me for the purpose of verifying the supporting documentation I have provided with my application and for BCI to supply my contact details and any relevant official records to educational institutions I am eligible to gain admissions to.

SECTION H – STUDENT SIGNATURE

STUDENT SIGNATURE

Student Name: _____

Signature: _____

Date: ____ / ____ / ____

Office Use: Application Checklist

Sales Team – Section A to H

Signature

Admissions Team

Signature

Date Entered in SMS

DD / MM / YYYY