



**To complete this form:**

- Answer all questions on the form.
- Use BLOCK LETTERS and tick check boxes where required.
- Do not complete this form if you are an Australian/New Zealand citizen, Australian Permanent Resident, or a Permanent Humanitarian visa holder.

**Please return form by email to**

[apply@aihe.sa.edu.au](mailto:apply@aihe.sa.edu.au) OR In-Person:

**Adelaide:** Level 5, 127 Rundle Mall  
Adelaide, SA 5000 Australia

**Melbourne:** Level 2, 209 Lonsdale St  
Melbourne VIC 3000 Australia

## 1. STUDENT STATUS

Have you been previously enrolled at AIHE?  No  Yes → Student ID Number \_\_\_\_\_:

Have you previously studied in Australia?  No  Yes → Please provide details under Item 6

Do you have a Unique Student Identifier (USI)?  No  Unsure  Yes → USI \_\_\_\_\_

## 2. PERSONAL DETAILS

Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Other:	Date of Birth: (dd/mm/yyyy)	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Not Stated
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Family Name:	Passport Number:
Given Names:	Country of Issue:
Country of Birth:	Date of Issue (dd/mm/yyyy)
Citizenship:	Date of Expiry (dd/mm/yyyy)

Please choose one of the following: <input type="checkbox"/> I am applying for a Student Visa (500) <input type="checkbox"/> I already hold a current Student Visa (500)	<input type="checkbox"/> I hold another type of Australian Visa (please list) _____:
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## 3. ADDRESS DETAILS

**Please ensure that the applicant's personal email and contact information is used. This is a government requirement.**

Email:	Mobile:
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**Address**

Number and Street:			
Town/City:	State:	Country:	
Postcode/Zip:	Telephone:		

**Permanent Address in Home Country (please do not use PO Box numbers)**

Number and Street:			
Town/City:	State:	Country:	
Postcode/Zip:	Telephone:		

## 4. ENGLISH LANGUAGE PROFICIENCY

How do you intend to meet AIHE's English language requirement?

<input type="checkbox"/> English is my first language		
<input type="checkbox"/> English proficiency test (e.g. Cambridge, IELTS, TOEFL, DAAD):	Score:	Date:
<input type="checkbox"/> Other (provide details):		



## 5. AIHE STUDY PROGRAM SELECTION

**Course Name:**

- Bachelor of Business (CRICOS: 0100123) [Refer to the course overview at <https://aihe.sa.edu.au/courses/bachelor-of-business>]
  - Master of Business Administration (CRICOS:104601K) [Refer to the course overview at <https://aihe.sa.edu.au/courses/master-of-business-administration>]
  - Graduate Certificate in Management (CRICOS: 112703D) [Refer to the course overview at <https://aihe.sa.edu.au/courses/graduate-certificate-in-management>]
  - Study Abroad Program (Inbound) (CRICOS: 112704U) - Master of Business Administration
  - Study Abroad Program (Inbound) (CRICOS: 112704U) - Bachelor of Business
- [Refer to the course overview at <https://aihe.sa.edu.au/courses/study-abroad>]

**Campus:**       Adelaide                       Melbourne

Select your preferred study intake:

<input type="checkbox"/> Study Period 1 (commencing in February/March)	<input type="checkbox"/> Study Period 2 (commencing in June/July)	<input type="checkbox"/> Study Period 3 (commencing in October)	Year:
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## 6. PREVIOUS and CURRENT SECONDARY and POST-SECONDARY STUDIES

Institution/ School	Name of Award/ Qualification	Year Completed/ to be completed	Language of Instruction	Country	Main Fields of Study (if post-secondary)

Do you want to claim recognition of prior learning?     No     Yes

If yes, please download and complete an *Application for Credit Form*, attach the required supporting evidence, and submit with your application for admission. The *Form* is available from <http://aihe.sa.edu.au/pages/policy-and-procedure/student-forms>.

## 7. SUPPORT SERVICES

Do you have a disability, impairment or long-term medical condition, which may affect your studies?

No    Yes →  Hearing    Learning    Mobility    Vision    Medical    Other:

This information is used in a confidential manner to assist you in accessing support services as required.

## 8. AGENT DETAILS

Is this application form prepared through an agent of AIHE?     No    Yes → Please provide the agent's details:

Agent Name:			
Town/City:	State:	Country:	



Postcode/Zip:		Email:	
Telephone:		Mobile:	

Do you authorise AIHE to directly contact this agent relating to your application?  No  Yes

## 9. FINANCIAL SUPPORT

Please indicate your source of financial support and for invoice purposes, please provide the name and contact details of the person or organisation paying your fees.

- I am a private student supported by myself/my family.
- I am fully supported by a third party (**attach documentation**) → Name of the third party:
- I will apply for financial aid from my government, employer, or any other third party.

## 10. OVERSEAS STUDENT HEALTH COVER (OSHC)

**It is a condition of your student visa to have Overseas Student Health Cover (OSHC) for the duration of your visa.** Additional costs apply for OSHC. Further information on OSHC can be found on the Australian Government website <https://www.studyinaustralia.gov.au/english/live-in-australia/insurance>.

AIHE can arrange OSHC on your behalf or you can purchase OSHC from one of the Australian Government-approved providers. AIHE's preferred provider is Allianz Global Assistance Australia [www.allianzassistancehealth.com.au](http://www.allianzassistancehealth.com.au). If you are applying for a student visa and would like AIHE to arrange your OSHC on your behalf, please indicate the OSHC policy you require:

AIHE to arrange OSHC?  No  Yes  
 Type of Cover?  Single  Couple  Family

Single cover is cover for the student only. Couple is cover for the student and their partner as listed on the student's dependant visa. Family is cover for the student, their partner, and their dependent children under 18 years of age if they live with the student in Australia.

You will be given details about the cost of OSHC in your Letter of Offer and at the time of acceptance you will be requested to confirm your arrangements for OSHC.

## 11. TERMS AND CONDITIONS

- All information provided in this application form and any supporting documentation must be true and correct. **All documents must be certified\* copies.** AIHE must be notified of any changes to the information provided within 28 days upon the date of such change occurrence.
- Submitted documents supporting this application become the property of AIHE and will not be returned to the applicant. Therefore, please do not send irreplaceable original documents e.g. your degree parchment.
- AIHE reserves the right to vary or reverse any decision regarding admission or enrolment made based on incorrect or incomplete information and/or pursuant to law or regulation.
- Where an application has been submitted to AIHE via a third party (e.g. AIHE's representative or partners, agents), AIHE may communicate with the third party regarding the application and enrolment at AIHE.
- AIHE may carry out a Visa Entitlement Verification Online (VEVO) check to confirm the applicant's study rights where possible.
- The information collected on this form may be disclosed if authorised or required by law, and/or in certain circumstances the Australian Government and/or designated authorities authorised by the AIHE, in accordance with the AIHE's Privacy Policy and Procedure available at <http://aihe.sa.edu.au/pages/policy-and-procedure/policy-and-procedure-directory> and where applicable, the Director of the Tuition Protection Scheme, pursuant to obligations under the Education Services for Overseas Students (ESOS) Act 2000 and the National Code 2018.
- Should this application result in an offer of admission to AIHE, this Application form will constitute part of the written agreement between the student and AIHE. Applicants should read all the documents contained in the written agreement carefully before accepting an offer and entering into a written agreement with AIHE.



- By signing and submitting this application, I declare all the information I have provided is accurate and that I agree to the terms and conditions as outlined in this section.

Applicant Full Name:		
Signature:	Date (dd/mm/yyyy)	
Full name of applicant's guardian (for applicants under 18 years):		
Signature:	Date (dd/mm/yyyy)	

## 12. CHECKLIST

Please ensure you have attached the following:

- Certified\* copy of your personal details and signature page of your passport and / or visa grant letter (if applicable).
- Certified\* copies of your qualifications and academic transcripts. You must also include an explanation of the grading system at your home institution (this information is often found on the reverse side of official academic transcripts). English translations are required if the original documents are not in English.
- Application for Credit / Recognition of Prior Learning Form* and supporting evidence if you wish to be considered for recognition of your prior learning.
- Any relevant financial support documentation (*if applying for a student visa from overseas*).
- A personal statement addressing the [Genuine Student assessment](#) requirement (*if applying for a student visa from overseas*).
- Certified\* copies of your IELTS/TOEFL results or other similar English tests, where applicable.
- Signed Declaration.

\* A certified copy of a document is one that has been signed and stamped by a Justice of the Peace or other public notary, e.g. lawyer, policeman, solicitor or embassy official. The public notary must sight the original document before he/she can certify the copy. Authorised AIHE staff and education agents may also certify documents.

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To be eligible for admission, the applicant must be 18 years of age at the time of commencing study in a course or subject.