

Please print clearly in English. Tick all boxes where appropriate.

Family Name:

Given Names:

Title: Mr.  Ms.  Other:  Sex:  MALE  FEMALE

Date and Country of Birth:  /  /

DAY MONTH YEAR COUNTRY

Nationality:

If you are an international student, please nominate the Australian Embassy or High Commission at which your visa application will be processed.

Contact Details

Name of Parent / Guardian and Address for Correspondence (mailing address):

Family Name:

Given Names:  Global Opportunities  
 HS-27, 2nd Floor, Kailash Colony Main Market,  
 New Delhi 110048

Address:  Ph: 91-29237795, 29247796, 32427795  
 Fax: 91-11-41632038  
 Email: helpdesk@global-opportunities.net

Home Telephone:

Business Telephone:

Facsimile:

Email:

School Record

School Attended:

Country:

Highest Level of Study Completed:

Language of Instruction:

Are certified copies of your academic records attached?  YES  No  
(translated to English if necessary)

Educational Enterprises Australia Pty Ltd Provider Code 00561M

# Application for Admission

## Program Selection

Please indicate (✓) which program(s) you are applying for and write in the program dates.

**ELICOS**

Start	End	No. Weeks
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>

**Secondary Studies**

Year 10  Year 11  Year 12

Start	End
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

**South Australian Universities' Foundation Studies**

Start	End	No. Weeks
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>

Please indicate your preferences:

1 Undergraduate Program

University

2 Undergraduate Program

University

**Degree Transfer (DTP)**

Start	End
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

**Certificate / Diploma**

Certificate IV

Diploma of Business  Diploma of Arts (Media & Communication)

Diploma of Computing & IT

Start  /  /  End  /  /

Please indicate your University Preference:

Undergraduate Program

University



# application for admission

## English Proficiency

Please provide details of your English language qualifications

IELTS Score:

TOEFL Score:

Eynesbury Placement Test Score:

Date obtained:

## Eynesbury Accommodation

Do you want accommodation arranged for you?

No

Yes

If yes, what type of accommodation?

Homestay

International Student Residence

## Airport Reception Service

Do you require Airport reception?

No

Yes

## Passport & Visa

Please supply the following details:

Passport Number:

Passport Expiry Date:

What visa will you apply for?

Student

Working Holiday

Visitor

Students on a Visitor visa or Working Holiday visa should take out appropriate health insurance themselves

## Medical Conditions

Do you have any medical conditions that the school should be aware of?

No

Yes

If yes, please explain:

(Further information may be requested)

## Declaration

The information supplied on this application form will be used by Eynesbury in the enrolment process. I declare the information I have supplied on this form is, to the best of my understanding and belief, complete and correct. I understand the giving of false or incomplete information may lead to the refusal of my application or cancellation of enrolment. I give permission to obtain official records from any educational institution attended by me. I also authorise Eynesbury to supply any relevant official records to educational institutions to which I am seeking admission and to government bodies. If I have used an Agent to assist me with the completion of this application form, then I accept that this Agent is acting on my behalf and therefore authorise Eynesbury to transmit any information in respect of my application for study and any subsequent study details, including results and attendance, to this Agent. I understand that I have the right to request Eynesbury (in writing) to cease supplying any information about myself to this Agent and that I can contact Eynesbury to request a copy of Eynesbury's Privacy Policy. I also understand that my fees may increase (usually not more than 5% annually). I accept liability for payment of all fees as explained in the Eynesbury brochure, and I agree to abide by the Refund Policy as specified in the Eynesbury brochure. I have also read the section in the Eynesbury brochure relating to the cost of living and I understand that living expenses in Australia may be higher than in my own country and I confirm that I am able to meet these costs. I give my consent (unless otherwise expressed in writing by myself) that my image may be included in Eynesbury promotional materials.

Applicant's signature:

Date: / /

Parent's signature:

Date: / / (if applicant is under 18 years of age)

## Personal Information

The personal information provided by students may be made available to Commonwealth and State agencies and the Fund Manager of the ESOS Assurance Fund pursuant to obligations under the ESOS Act 2000 and the national code.

## Address for Applications

Eynesbury International, The Admissions Manager, 15-19 Franklin Street, Adelaide, South Australia 5000. Telephone: (61 8) 8216 9129 / 8410 5266 Facsimile: (61 8) 8410 5254

Email: [admissions@eynesbury.sa.edu.au](mailto:admissions@eynesbury.sa.edu.au) Web: [www.eynesbury.sa.edu.au](http://www.eynesbury.sa.edu.au)

Agent or representative's stamp