

# APPLICATION FORM – Short Courses

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Note: International students will not be able to apply for a student visa with these courses

## PERSONAL DETAILS

FAMILY NAME: \_\_\_\_\_ GIVEN NAMES: \_\_\_\_\_

Gender:  Male  Female DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_ License/passport#: \_\_\_\_\_ (please attach copy)

Email Address: \_\_\_\_\_ Mobile: \_\_\_\_\_

Address in Australia: \_\_\_\_\_ Telephone: \_\_\_\_\_

How were you introduced to APC? \_\_\_\_\_

Do you have a **Unique Student Identifier (USI)\***:  Yes → my USI is \_\_\_\_\_  
 No → I give permission for APC to apply for a USI for me  
 No → I will apply for a USI at <http://usi.gov.au> and notify APC of my number

\* Please note that by law the College requires a Unique Student Identifier (USI) before we issue your Statement of Attainment

## COURSE SELECTION

- SITHFAB201 Provide responsible service of alcohol  
 SITHGAM201 Provide responsible gambling services  
 SITHFAB204 Prepare and serve espresso coffee  
 SITXFSA101 Use hygiene practices for food safety } Barista

Location:  SYDNEY  BRISBANE  
 OTHER: \_\_\_\_\_  
 Group or High School name: \_\_\_\_\_  
 Start date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## ADDITIONAL INFORMATION REQUIRED FOR AVETMISS REPORTING PURPOSES

### What country were you born in?

- Australia  
 Other → please specify \_\_\_\_\_

### Do you speak a language other than English at home?

- No, English only  
 Yes - please specify\*  
 → \*what is the language you speak most often?  
 \_\_\_\_\_  
 → \*how well do you speak English?  
 Very well  Well  Not well  Not at all

### Are you of Aboriginal or Torres Strait Islander origin? (Tick all that apply)

- No  Yes, Aboriginal  Yes, Torres Strait Islander

### Do you consider yourself to have a disability, impairment or long-term condition?

- No  Yes - please specify\*  
 → \*tick all that apply  
 Hearing/Deaf  Physical  Intellectual  
 Learning  Mental Illness  
 Acquired Brain Impairment  Vision  
 Medical Condition  
 Other \_\_\_\_\_

### What is your highest COMPLETED school level? (Tick ONE box)

- Year 12 or equivalent  Year 11 or equivalent  
 Year 10 or equivalent  Year 9 or equivalent  
 Year 8 or below  Never attended school

In which YEAR did you complete that school level? \_\_\_\_\_

Are you still attending secondary school?  No  Yes

### Have you SUCCESSFULLY completed any of the following qualifications?

- No  Yes → tick all that apply  
 Bachelor Degree or Higher Degree  
 Advanced Diploma or Associate Degree  
 Diploma (or Associate Diploma)  
 Certificate IV (or Advanced Certificate/ Technician)  
 Certificate III (or Trade Certificate)  
 Certificate II  
 Certificate I  
 Certificates other than the above

### Which BEST describes your current employment status?

- (Tick ONE only)  Full-time employee  
 Part-time employee  
 Self employed - not employing others  
 Employer  
 Employed - unpaid worker in a family business  
 Unemployed - seeking full-time work  
 Unemployed - seeking part-time work  
 Not employed - not seeking employment

### Which BEST describes your main reason for undertaking this course?

- (Tick ONE only)  To get a job  
 To develop my existing business  
 To start my own business  
 To try for a different career  
 To get a better job or promotion  
 It was a requirement of my job  
 I wanted extra skills for my job  
 To get into another course of study  
 For personal interest or self-development  
 Other reason

I acknowledge and agree that; this is an application only to study at Australian Pacific College (i.e. there is no guarantee of a place); and, if an offer is made to me my acceptance is subject to the terms and conditions set out in the letter of offer.

Student Signature:  
Date:

Parent/guardian signature:  
(Required for applicants under 18 years old)

Please send the Application Form by mail or by Fax: (61 2) 9251 7575 OR apply online at: [www.apc.edu.au](http://www.apc.edu.au)

"Dedicated to Quality, Equity and Advancement"

[www.apc.edu.au](http://www.apc.edu.au)  
Email: [info@apc.edu.au](mailto:info@apc.edu.au)

VET Short Course Application Form YR 2015 v1.1R.doc

Kent Street Campus (CBD)  
189 Kent Street  
Sydney NSW 2000  
Phone: (61 2) 9251 7000  
Fax: (61 2) 9251 7575

York Street Campus (CBD)  
Level 5, 37 York Street  
Sydney NSW 2000  
Phone: (61 2) 9279 2122  
Fax: (61 2) 9299 1135

Clarence Street Campus (CBD)  
Level 3, 123 Clarence Street  
Sydney NSW 2000  
Phone: (61 2) 9262 3222  
Fax: (61 2) 9262 3388

Bondi Junction Campus  
1/100 Ebley Street  
Bondi Junction NSW 2022  
Phone: (61 2) 9389 9755  
Fax: (61 2) 9389 9766

Manly Beach Campus  
48-52 Sydney Road  
Manly NSW 2095  
Phone: (61 2) 9976 2122  
Fax: (61 2) 9976 218

Brisbane Campus (CBD)  
Level 4, 115 Queen Street  
Brisbane QLD 4000  
Phone: (61 7) 3003 0088  
Fax: (61 7) 3003 1138