

2015 Enrolment Form



ABILITY
English



MEGT
INSTITUTE

Personal Information

Family name (as stated in your passport):

Given names (as stated in your passport):

Date of birth (dd/mm/yyyy):

Please note students must be over 18 years old by the time they commence their course.

Country of birth:

Nationality

Gender

☐ male ☐ female

Passport number

Passport expiry date:

Visa number (if applicable):

Type of visa you will be applying for:

☐ Student ☐ Tourist ☐ Business ☐ Working Holiday ☐ Dependant ☐ Other

Visa expiry date (if applicable):

E-mail address:

From which country are you applying for a visa:

Address in Australia (if known):

Phone number in home country:

Address in home country:

Phone number in Australia (if known):

Postal address in Australia ☐ As above

Emergency contact person

Name:	
Phone number:	Relationship:

Highest level of school completed:

Level of English:

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

☐ Yes* ☐ No

*If Yes, please indicate the areas of disability, impairment or long-term condition:

☐ Hearing/Deaf ☐ Intellectual ☐ Vision ☐ Physical ☐ Acquired brain impairment
☐ Medical condition ☐ Mental illness ☐ Learning Other:

How did you learn about us?

☐ Friend ☐ Agent ☐ Website ☐ Facebook ☐ Youtube ☐ Other _____

Are you applying through an Education Agent?*

☐ Yes ☐ No

*This section is mandatory for all applicants to complete.

Agent's name:

Name of contact counsellor:

Email:

I nominate this Education Agent to be my agent for the entire duration of my enrolment.

International Students must maintain Overseas Student Health Cover (OSHC) for the proposed duration of their student visa. ABILITY/MEGT can arrange visa length cover, on request, with Allianz Global Assistance, our preferred provider of OSHC.

☐ Yes, please arrange OSHC: ☐ single ☐ dual family* ☐ multi family⁺

*Dual Family - covers one valid student visa holder plus either one adult spouse or recognised de-facto partner or more dependent children.

+Multi Family - covers one student visa holder plus more than one dependant which can only include one adult spouse or recognised de-facto partner and one or more dependant children.

☐ No, I will make own OSHC arrangement for the duration of my student visa

If you have a current OSHC, please quote your policy expiry date:

Do you require accommodation or airport pickup?

☐ Yes (If yes please go to page 2)

☐ No

At which learning facility are you applying? (please select both, if it is for packaging)

<input type="checkbox"/> Ability English – Sydney City Campus (CRICOS no 01530K) - please go to page 2	<input type="checkbox"/> MEGT Institute – Sydney City Campus (CRICOS no 02517K) - please go to page 3
<input type="checkbox"/> Ability English – Melbourne City Campus (CRICOS no 01530K) - please go to page 2	<input type="checkbox"/> MEGT Institute – Melbourne City Campus (CRICOS no 02517K) - please go to page 3

ABILITY English Course Enrolments

General English & General English Plus <input type="checkbox"/> Sydney <input type="checkbox"/> All Day English <input type="checkbox"/> Melbourne <input type="checkbox"/> Evening English <input type="checkbox"/> Morning English <input type="checkbox"/> Afternoon English* <small>*General English only</small>	Survivor English <input type="checkbox"/> Sydney All Day English <input type="checkbox"/> Melbourne All Day English
IELTS Test Preparation <input type="checkbox"/> Sydney <input type="checkbox"/> All Day English <input type="checkbox"/> Melbourne <input type="checkbox"/> Evening English	Pronunciation & Fluency <input type="checkbox"/> Sydney All Day English <input type="checkbox"/> Melbourne All Day English
Evening Part-time IELTS <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri <input type="checkbox"/> Sydney <input type="checkbox"/> 2 nights/wk (excl. Wed) <input type="checkbox"/> 3 nights/wk <input type="checkbox"/> Melbourne <input type="checkbox"/> 4 nights/wk <input type="checkbox"/> 5 nights/wk	Cambridge Test Preparation <input type="checkbox"/> FCE <input type="checkbox"/> Sydney <input type="checkbox"/> All Day English <input type="checkbox"/> CAE <input type="checkbox"/> Melbourne <input type="checkbox"/> Evening English* <input type="checkbox"/> FCE/CAE exam <small>Do you want ABILITY English to book and organise your payment of the external Cambridge exam?</small> * Sydney only
Private English Classes <input type="checkbox"/> Sydney <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri <input type="checkbox"/> Melbourne Hours per week: <input type="text"/> Number of weeks: <input type="text"/>	English for Academic Purposes - EAP <input type="checkbox"/> Sydney All Day English <input type="checkbox"/> Melbourne All Day English <input type="checkbox"/> EAP 2 <input type="checkbox"/> EAP 3 <input type="checkbox"/> EAP 4 Higher Ed required English score: <input type="text"/> <input type="checkbox"/> Package with HIGHER Ed Provider Higher Ed Provider's details: <input type="text"/> Higher Ed start date: <input type="text"/>

Number of weeks: Start date (Mondays): (dd/mm/yyyy)(We will advise if the start date cannot be a Monday because of public holidays.)
 Student visa study break option: ☐ Yes ☐ No

For students who wish to study more than one course:

Name of second course:	Number of weeks:	Course start date (dd/mm/yy):
<input type="text"/>	<input type="text"/>	<input type="text"/>

Accommodation details:

Do you want us to arrange accommodation for you? ☐ Yes ☐ No

How many weeks? Start date: What type of accommodation would you like?

☐ Homestay
 ☐ Residential Accommodation
 ☐ Au Pair 'Live & Work' Accommodation (Sydney only)

Homestay details

a) ☐ Single ☐ Twin (only available for 2 friends with same starting dates otherwise single room rates apply)
 b) Do you have any allergies? ☐ yes ☐ no
 If yes specify:
 c) Do you have any health problems? ☐ yes ☐ no
 If yes specify:
 d) Are you smoker? ☐ Yes ☐ No
**Smoking is NOT allowed inside the home at any time. You are liable or responsible for stains or damage caused by your smoking inside. Please smoke outside only
 e) Can you share with a family who has children under 5 years old? ☐ Yes ☐ No
 f) Can you share with a family who has pets? ☐ Yes ☐ No
 g) Other requests:

Residential Accommodation details

(Please visit our website for a list of residential accommodations at www.ability.edu.au/accommodation/general-information and choose a residence you would prefer. Please note the requested accommodation may change depending on availability. You will be notified in advance.)
 Option 1
 Type of room:
 Option 2
 Type of room:

Au Pair 'Live & Work' Accommodation* details

(Please visit our website for more information on the Au Pair 'Live & Work' Accommodation at www.ability.edu.au/student-services/accommodation/aupair)
 What experience have you had working with children?

* Sydney only

Do you require airport pick up? ☐ yes ☐ one way ☐ round trip ☐ no Flight arrival time:

Flight arrival date (dd/mm/yyyy) Flight no:

(Flight details must be provided a minimum of 2 weeks before arrival date. Accommodation will not be arranged until full payment and flight details are provided)

Terms and conditions of enrolment

You can access the full terms and conditions of enrolment at the ABILITY English website: www.ability.edu.au

MEGT Institute Course/Qualification Enrolments

Name of course:		Name of course:		Name of course:	
Code/Qualification level:	Intake date (month, year):	Code/Qualification level:	Intake date (month, year):	Code/Qualification level:	Intake date (month, year):

English skills*

What is the main language you speak at home? ☐ English ☐ Other - please specify

How well do you speak English? ☐ Very well ☐ Well ☐ Not well ☐ Not at all

Have you studied at secondary or post-secondary level with English as the medium of instruction and assessment? ☐ Yes ☐ No If yes, please provide evidence.

English studies*

Are you planning to enrol, or are you enrolled in English Language Studies?

Expected start date:	Expected duration:	Expected completion date:	Level:	Institution:
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English test score* Have you taken an English test in the last 2 years? ☐ Yes ☐ No If no, do you plan to take a test? ☐ Yes ☐ No

If yes, please complete the following details:

Test type:	Result:	Test date:
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Do you attend an English language college? ☐ Yes ☐ No If yes please complete details below

College name:	Duration:	Level completed to date:	Result:
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Do you have documentation to confirm your English language proficiency at the required course entry level? ☐ Yes ☐ No If yes, please attach evidence.

Educational Background and qualifications

Schooling

What is the highest COMPLETED school level. If you completed in another country, select the Australian High School System equivalent.

<input type="checkbox"/> Year 12 or equivalent	<input type="checkbox"/> Year 11 or equivalent	<input type="checkbox"/> Year 10 or equivalent	<input type="checkbox"/> Year 9 or equivalent	<input type="checkbox"/> Year 8 or equivalent	<input type="checkbox"/> Never attended school
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In which YEAR did you complete that school level? Are you still attending secondary / high school? ☐ Yes ☐ No

Skills recognition

Do you wish to apply for credit transfer (CT) from previous study?

<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, please provide a certified copy of an official documents, including detailed unit/subject descriptions.
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Do you wish to apply for Skills Recognition (RPL,RCC)?

<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, please provide a completed Skills Recognition Application Form, available on the website, or <input type="checkbox"/> request an initial Skills recognition interview.
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Previous Qualification Achieved

Have you SUCCESSFULLY completed any of the following qualifications? ☐ Yes ☐ No If yes, then tick ANY applicable boxes.

<input type="checkbox"/> Bachelor Degree or Higher Degree	<input type="checkbox"/> Advanced Diploma or Associate Degree	<input type="checkbox"/> Diploma (or Associate Degree)
<input type="checkbox"/> Certificate IV (or Advanced Certificate/Technician)	<input type="checkbox"/> Certificate III (or Trade Certificate)	<input type="checkbox"/> Certificate II
<input type="checkbox"/> Certificate I	<input type="checkbox"/> Certificate other than the above	

Please provide the specific name/s of the qualification/s you have successfully completed

Name of qualification achieved and approximate year it was achieved:	Name of qualification achieved and approximate year it was achieved:
Name of qualification achieved and approximate year it was achieved	Name of qualification achieved and approximate year it was achieved

Employment

Of the following categories, which BEST describes your current employment status?

<input type="checkbox"/> Full-time employee	<input type="checkbox"/> Part-time employee	<input type="checkbox"/> Casual employee
<input type="checkbox"/> Employed – (unpaid worker in a family business)	<input type="checkbox"/> Unemployed – seeking full-time work	<input type="checkbox"/> Unemployed – seeking part-time work
<input type="checkbox"/> Self-employed – not employing others	<input type="checkbox"/> Not employed – not seeking employment	<input type="checkbox"/> Employer

Study Reason

Of the following categories, which BEST describes your main reason for undertaking this course? (Tick one box only)

<input type="checkbox"/> To get a job	<input type="checkbox"/> It was a requirement of my job	<input type="checkbox"/> To develop my existing business
<input type="checkbox"/> I wanted extra skills for my job	<input type="checkbox"/> To start my own business	<input type="checkbox"/> To get into another course of study
<input type="checkbox"/> To try for a different career	<input type="checkbox"/> For personal interest or self-development	<input type="checkbox"/> To get a better job or promotion
<input type="checkbox"/> Other reasons (Please state) _____		

Are you undertaking this course as a pathway to higher education? ☐ No ☐ Yes (If yes, please specify which course below)

Name of higher education course you are hoping to apply for at the completion of this course? _____

Are you an Australian Aboriginal or Torres Strait Islander origin? (for persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes)

☐ No ☐ Yes, Aboriginal ☐ Yes, Torres Strait Islander

Supporting Documentation

For some courses supporting documentation must be included. Note: Do not include originals (copies only) as they will not be returned. (Applications that are submitted without necessary supporting documents may be delayed in processing.)

Compulsory attachments

<input type="checkbox"/> Certified academic transcripts if applying for a Diploma course	<input type="checkbox"/> Evidence of English proficiency
<input type="checkbox"/> Certified copies of graduation certificates if applying for a Diploma course	<input type="checkbox"/> Certified copies of passport and current Australian visa (if applicable)
<input type="checkbox"/> Evidence of vocational experience if required for course entry.	

Submit these attachments if applicable (please do not include originals (copies only) as they will not be returned):

<input type="checkbox"/> Certified English translations	<input type="checkbox"/> Disability support details
<input type="checkbox"/> Supplementary documents/forms	<input type="checkbox"/> Health Cover

Terms and conditions of enrolment

You can access the full terms and conditions of enrolment at the MEGT Institute website: www.megt.com.au.

The Conditions of Enrolment

The Conditions of Enrolment for ABILITY English and MEGT Institute explain students' parents' and guardians' rights and responsibilities, as well as our responsibilities.

The Conditions of Enrolment cover the following areas:

<ul style="list-style-type: none">• Enrolment• Attendance• Student welfare• Withdrawing from your course of study• Course fee and Other Refunds	<ul style="list-style-type: none">• Complaining & appealing decisions about your studies that you do not agree with• Your privacy as a student• Personal information we collect: why we need it and what we do with it• Notifying us when you change your address• Student Course Variations
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Before you apply to study with us you must read through the Conditions of Enrolment at: www.ability.edu.au and/or www.megtinstitute.edu.au

It is very important that you read and understand these before you apply to study with us so that you fully understand your responsibilities as a student at ABILITY English and/or MEGT Institute

It is also important that we make clear our responsibilities as your Australian education provider. These Conditions of Enrolment will form part of your enrolment contract with ABILITY English and/or MEGT Institute.

Access to Information and Protection of Privacy:

ABILITY English/MEGT Institute is committed to protecting student privacy including all personal information and is bound by the privacy laws of Australia.

The law requires us to take all reasonable steps to ensure that information we collect and hold about our students is relevant for intended purpose and correct and current.

We need information collected on this form and during enrolment to meet our obligations under the ESOS Act and the National Code 2007, and to ensure student compliance with the conditions of their visas and their obligations under Australian immigration laws generally.

The authority to collect this information is outlined in the ESOS Act and regulations and the National Code 2007 including using the information to access the Visa Entitlement Verification Online (VEVO) database which is provided by the Commonwealth of Australia, represented by the Department of Immigration and Border Protection (DIBP).

This information will be provided, in certain circumstances, to the Australian Government and designated authorities, your nominated Education Agent, your homestay provider if applied for, and ABILITY English/MEGT Institute's agents, officers and employees. No further access to your personal information will be provided to other organisations or persons without your consent, or unless authorised by law. For more information in relation to how your information may be used or disclosed please refer to <http://www.megt.com.au/Pages/PrivacyPolicy.aspx> or contact MEGT (Australia) Ltd, trading as MEGT Institute's Privacy Officer, Russell Jones on phone 03 9871 5555 or email Russell.Jones@megt.com.au

Information in this form is correct at time of publication, however, we reserve the right to alter courses, prices and terms and conditions without notice.

Student Declaration

I declare that the information I have supplied on this form is complete and correct and that submission of incorrect or incomplete information may delay my application or lead to my application being refused.

I understand that my personal information may be made available to Commonwealth and State government agencies such as the Australian Skills and Quality Authority (ASQA), the Tuition Protection Service (TPS), Overseas Student Health Cover Provider (OSHC), the Department of Immigration and Border Protection (DIBP), and other relevant agencies for reporting and/or statistical data collection purposes.

I authorise the Education Agent nominated by me on this form to act on my behalf in matters relating to my enrolment.

I authorise ABILITY English/MEGT Institute to obtain further information in respect to my application and if necessary verify my English language proficiency and/or previous academic credentials.

I authorise ABILITY English/MEGT Institute to collect and share my personal information with partner entities and organisations for Accommodation, Homestay and/or Au Pair placement purposes, as requested by me on this Enrolment Form

I also understand and agree and consent that my personal information may be made available to any contractor(s) engaged by MEGT Institute or work placement hosts in connection to the provision of training and assessment services or registration and/or compliance.

I declare that I will be 18 years of age or older at the time the course I am applying for commences and/or before arriving in Australia.

I have read and understood the Conditions of Enrolment, the policies and procedures relating to my enrolment as outlined on the website at www.ability.edu.au and/or www.megtinstitute.edu.au and the Privacy Policy and I agree with these conditions.

Student Name: _____
Signature _____
Date: ____ / ____ / ____

If the student is under 18 years of age at the time of completing this form, but will be 18 years of age by the time they commence their course, student parent or guardian must sign this application form.

Parent/Guardian Name: _____ Relationship: _____

Signature _____ Date: ____ / ____ / ____



Ability Education Pty Ltd trading as
ABILITY English
A Division of MEGT Education

ABN: 60 075 234 007
CRICOS Provider Code: 01530K



MEGT (Australia) Ltd trading as
MEGT Institute
A Division of MEGT Education

ABN 85 006 266 280
RTO Provider Code: 3945
CRICOS Provider Code: 02517K