



The Illawarra Business College

A division of Focal Holdings Pty Ltd
A.C.N. 064 243 367

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PRE-STUDY EVALUATION FORM

Instructions for completing this form:

- This form must be completed by the **Educational Agent or College Representative** interviewing the prospective student. Please ensure that all questions are answered.
- This form will assist agents and the College to determine whether the prospective student qualifies as a **Genuine Temporary Entrant (GTE)** for student visa purposes.
- Educational Agents must be aware that it is their responsibility to carefully review and assess a prospective student's application.
- The Educational Agent or College Representative must sign and date this form.
- If the prospective student meets the GTE and Government requirements, this form (plus any accompanying documentation) should then be submitted to admissions@tibc.nsw.edu.au.
- The College reserves the right to randomly select and audit the Educational Agents' assessment procedures.

Agents should note that recruiting an international student who does not:

- meet the Australian Government Student Visa requirements, or
- complete the nominated course of study (irrespective of the reason) and/or who fails to return to their home country according to the Student Visa requirements

may result in the suspension or termination of the Agency Agreement with our College.

Student's Family Name (Please print):		Given Name	
Intended Course (Please print):			
Date of Birth:	Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Home Address:			
City/Town/Suburb	State:	Country:	
Home Telephone:	Mobile:		
Email:	Skype Name:		

APPLICANT BACKGROUND INFORMATION

Please ask the applicant the questions below and ensure you document responses carefully

Have you previously travelled overseas?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please provide details such as where to, when, and reason.
Have you ever had a visa cancelled or refused by any country (especially Australia)?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please provide details together with copies of any relevant documentation.
Have you applied for and been refused admission to an Australian College previously?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, what was the reason given for the rejection? Please provide name of College and course you had applied for.
What is your marital status?	Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> DeFacto <input type="checkbox"/>	If married or in DeFacto relationship, no of years?
If married or in defacto relationship, are you living with your spouse/partner?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If no, where does your spouse/partner live?
Are any family members intending to travel to Australia with you?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please provide their names and their relationship to you
Name:	Relationship:	Age:
Name:	Relationship:	Age:
Name:	Relationship:	Age:
Name:	Relationship:	Age:

Have you any relatives currently living in Australia?		Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes, please provide their full names, relationship and the town/city they live in.	
Name:		Relationship:		City/Town:	
Name:		Relationship:		City/Town:	
Name:		Relationship:		City/Town:	
ACADEMIC HISTORY AND EMPLOYMENT BACKGROUND					
Prior Education (Please indicate highest level of academic achievement):					
• Yr 10 or below	<input type="checkbox"/>	• Cert I to Cert III	<input type="checkbox"/>	• Diploma/Advanced Diploma	<input type="checkbox"/>
• Year 12	<input type="checkbox"/>	• Cert IV to Advanced Diploma	<input type="checkbox"/>	• University Degree	<input type="checkbox"/>
English Language Skills (Please provide details of any English language tests undertaken and relevant scores)					
IELTS <input type="checkbox"/> Score:	TOEFL <input type="checkbox"/> Score:	Cambridge <input type="checkbox"/> Score:	PTE Academic <input type="checkbox"/> Score:		
Date of test:	Date of test:	Date of test:	Date of test:		
Other <input type="checkbox"/> (Please provide details):					
Employment History (Please indicate your most recent employment history, e.g. over the last 8 – 10 years):					
Job Title		No of Years	Brief Job Description		
OTHER LIFE SKILLS					
Please list any interests, community involvement, hobbies, life skills, etc.					
Do you have any disability/medical conditions that may affect your learning progress:			Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes, please provide details
RECOMMENDED REASONABLE ADJUSTMENT MEASURES:					
(Please specify whether there are any reasonable adjustment measures that the applicant requires as a result of any disability/medical condition)					
FINANCIAL CAPACITY					
Please ensure that the Applicant has completed the Financial Declaration Form. This form is required to determine whether the applicant has sufficient funds required to cover the first twelve (12) months of studying and living in Australia. Further details are available on the Australian Immigration website.					
Are you aware of the Australian Government's financial requirements for the first twelve (12) months of studying and living in Australia?		Yes <input type="checkbox"/> No <input type="checkbox"/>		If the applicant is not aware of the financial requirements, agents should refer them to the Australian Government's immigration website – www.border.gov.au	
Are you aware of the College's refund policy?		Yes <input type="checkbox"/> No <input type="checkbox"/>		If the applicant is not aware of the relevant policies, agents should ensure that you make them aware of these policies, available on College website – www.tibc.nsw.edu.au	
Are you aware of the College's student transfer policy?		Yes <input type="checkbox"/> No <input type="checkbox"/>			

STUDY REASON/CAREER OBJECTIVES (STATEMENT OF PURPOSE)

(N.B. The Statement of Purpose outlining the reason/s the applicant wishes to undertake this particular course of study is extremely important. Responses should be carefully considered as the College must have regard as to whether the applicant is a Genuine Temporary Entrant for Student Visa Purposes.)

Please provide a comprehensive Statement of Purpose – specifically addressing:

a) why you want to undertake the relevant course of study?

b) why have you chosen our College as your College of choice to study in Australia?

c) what is your commitment to study?

d) will you have any work commitments that might preclude you from studying once you have arrived in Australia?

Yes No

If yes, please provide details below:

e) have you researched possible study options in your home country that may be suitable to your needs?

Yes No

If not, please provide details why you have not considered study options in your home country:

f) how will the intended course assist you in your chosen career on your return to your home country?

DOCUMENT CHECKLIST

(to be completed by Agent’s Representative)

Qualification Originals MUST be sighted and copies MUST be provided to and retained by College (please indicate document sighted, e.g. IELTS Certificate or Higher School Certificate, etc. Please tick if document attached to this form.). If documents not sighted, applicant must be informed to provide originals prior to finalisation of enrolment.

	Tick	Notes
• Has the applicant submitted a completed enrolment form?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
• Does applicant meet the course entry requirements as set out on the College’s website?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
• Has the applicant submitted certified copies of their qualifications?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
• Does applicant have current student visa?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Expiry date:
• Has the applicant submitted certified copies of their English-language scores?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
• Has the applicant completed and submitted their Language, Literacy and Numeracy (LLN) Assessment?	Yes <input type="checkbox"/> No <input type="checkbox"/>	

• Does applicant have a Letter of Release from any other provider, if required?		Yes <input type="checkbox"/>	No <input type="checkbox"/>				
• Has the applicant submitted the Financial Declaration Form?		Yes <input type="checkbox"/>	No <input type="checkbox"/>				
• Does applicant have financial capacity to pay fees?		Yes <input type="checkbox"/>	No <input type="checkbox"/>				
Is course recommended?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Has applicant been advised?	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Alternative recommendation:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Has applicant been advised?	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Please specify alternative recommendation:							
Agency Company Name:							
Agent's Representative (please print):							
Agent's Representative Signature:				Date:			
College Use Only:	Letter of Offer Issued:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Date Issued:		Issuing Officer Signature:	
Additional Comments:							