GENUINE TEMPORARY ENTRANT (GTE) APPLICATION FORM



The purpose of this form is to enable Skills Australia Institute (SAI) to make an assessment of the genuineness of an applicant's intention to complete their studies at SAI. The form has four sections. Each section is targeting a specific area that SAI will base its assessment on, and the Department of Home Affairs (DHA) may be interested in during your visa application.

PERSONAL DETAILS

CONTACT DETAILS

Family Name	Postal Address
Given Name(s)	
Date of Birth (dd/mm/yy)	Email
Passport Number	Mobile
PREVIOUS STUDIES	
Have you previously studied in Australia? Yes No	
Start date (dd/mm/yyyy)	Start date (dd/mm/yyyy)
Completion date (dd/mm/yyyy)	Completion date (dd/mm/yyyy)
Name of Institution	Name of Institution
Which Course?	Which Course?
Start date (dd/mm/yyyy)	Start date (dd/mm/yyyy)
Completion date (dd/mm/yyyy)	Completion date (dd/mm/yyyy)
Name of Institution	Name of Institution
Which Course?	Which Course?
Start date (dd/mm/yyyy)	Did you successfully complete the course? Yes No If No, please give reason below
Name of Institution	
Which Course?	

GAPS IN YOUR STUDIES

Please provide details of all the study gaps (periods in which you were not studying) if the gap is more than 3 months.

Date (dd/mm/yyyy) to (dd/mm/yyyy)	Details of Gap

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- Excellent Accounts Pty Ltd
- Trading as Skills Australia Institute
- 🔰 10 Victoria Avenue, Perth WA 6000 👘
- Telephone: +61 8 6148 1300
- Fax: +61 8 9498 0806
- admissions@skillsaustralia.edu.au
- www.skillsaustralia.edu.au
- CRICOS Code: 03548F
- BABN: 78 126 274 682 | RTO Code: 52010

YOUR CURRENT CHOICE OF COURSE TO STUDY

Give details of your choice of studies at Skills Australia Institute

Name of Course	Intake /Year

Why have you chosen to study the course specified on your application?

Why have you chosen to study in Australia and not in your home country?

What are your reasons for choosing Skills Australia Institute?

How is this course relevant to your future career and educational plans?

Are you changing your area of study from previous studies or work experience? If yes, please explain why you have chosen to change your career path.

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ENGLISH

Have you undertaken any English Pro Please submit this with your application. www.skillsaustralia.edu.au/international-s	For information o	n English requirement	demic; TOEF ts please go tc	L, Cambri the follow	dge)? Yes No ing link:
Please specify the name of the Englis	sh test you com	oleted			
Name of English proficiency test co	ompleted	Date taken (dd/mm	л/уууу)		en are you planning to test? (dd/mm/yyyy)
IMMIGRATION HISTORY OF Have you travelled to Australia befor If yes, please give details below		AND FAMILY			
Date: (dd/mm/yyyy) to (dd/mm/yyyy)	What was the	reason for travel?		Visa typ	e (e.g.tourist visa,student visa)
Have you ever had an Australian visa (If yes, please attach/send us your visa re Are you married? Yes No (If yes, please give details below)			n visa cancelle	ed? 📃 Y	es 🗌 No
When did you get Name of Spor		ouse Date of Birth mm/yyyy)	Will you sp joining you Australia? (in	Spouse Passport number (if available)
Is your spouse currently employed? (Please attach/send us your spouse detai	Yes No				
Has your spouse travelled to Australi	a before? Ye	s No			
If yes, please give details below					
Date: (dd/mm/yyyy) to (dd/mm/yyyy)	What was the	reason for travel?		Visa tvo	e (e.g.tourist visa,student visa)

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CHILDREN AND/OR DEPENDENTS

Do you have children and/or d	dependents?	Yes	No

If yes, please give details below

Name of dependents	Date of Birth (dd/mm/yyyy)	Passport number (if available)

Will your spouse and/or children or dependents join you in Australia? Yes No (If yes, please give details below)

Name of dependent/spouse

Date of Birth (dd/mm/yyyy)

OTHER FAMILY AND RELATIVES

Do you have any relatives currently living in Australia? (including siblings, parents, grandparents, children, aunts, uncles and cousins) Yes No

If yes, please give details below

Name of Relative	Relationship to you	City of residence in Australia	Visa type (e.g. citizen or permanent resident or temporary/ student visa)

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OTHER FAMILY AND RELATIVES (CONTINUED)

List out all your family members (including parents, brothers and sisters)

Please give details below

Name of Family Member	Relationship to you	Country of residence	Age

FUNDING YOUR STUDIES

Are you aware of the total cost of tuition, living expenses, Overseas Student Health Cover (OSHC) and other costs involved to undertake study at SAI for yourself and any dependents (where relevant)? These amounts are approximate for 2018 and are subject to change each year. Yes No

Expenses	Per Person	Amount Required in AUD
Tuition	Applicant School age children (5-18)	\$9,000 per year \$8,000 per year
OSHC	Applicant Couple Family members onshore	For length of your visa (2 years = \$948; single) approx For length of your visa (2 years = \$5,703; couple) approx For length of your visa (2 years = \$10,582; family) approx
Living	Applicant Couple Child	\$20,290 per year \$7,100 per year \$3,040 per year
Travel	Applicant Family members	Return air fare to Australia One return air fare to Australia per person

http://www.border.gov.au/Trav/Stud/More/Student-Visa-Living-Costs-and-Evidence-of-Funds

If you have a family member or a sponsor providing funds for your tuition costs and/or living expenses. please complete the details below.

Sponsor's/Guarantor name	Relationship to you	\$AUD sponsor will provide to support you while studying in Australia

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Financial Sponsor Declaration	
I (Sponsor's name (Block letters)	will provide full financial
support for (Applicant's name (Block letters)	while studying
in Australia.	
Signature of sponsor/guarantor	Date
How will you ensure you have genuine access to sufficient funds to cover your full tuition living expenses for the duration of your course?	costs and general

DECLARATION

I, declare that the information I have provided above is accurate and complete. I declare I understand that Skills Australia Institute is relying on information provided by me to assess my application for admission.

I understand that I am required to abide by all conditions of my student visa, including work conditions, academic performance and satisfactory attendance.

I acknowledge it is my responsibility to notify Skills Australia Institute if there is any change to my circumstances, including ensuring my current address and Overseas Student Health Cover information are up to date.

I declare that I have a genuine intention to study the couse for which I have applied, and that I have access to sufficient funds to cover tuition fees, Overseas Student Health Cover, living expenses and travel expenses for myself (and my dependents where relevant), for the duration of my studies.

I also understand that it is a condition of this application that I provide any written consents necessary to enable Skills Australia Institute to verify independently any information supplied by me in relation to this application.

Signature:	D	ate:
International Admissions Officer Signature:	D	ate:

PLEASE COMPLETE THIS FORM AND SEND IT TO

Post: 10 Victoria Avenue, Perth WA 6000 Email: admissions@skillsaustralia.edu.au Web: www.skillsaustralia.edu.au

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