



# Hamro Institute of Business Technology Pty Ltd trading as Hamro College

Hamro Institute of  
Business Technology

## STUDENT ENROLMENT FORM (New Student)

A. Personal Details	
<b>1. Enter your full name</b>	
Family Name (Surname) :	
Given Name/s :	
Student ID Number :	Mobile:
<b>2. Enter your birth date</b> (Day/Month/Year):     /     /	<b>3. Gender:</b> (tick ONE box only) <input type="checkbox"/> Male <input type="checkbox"/> Female
<b>4. What is the address of your usual residence?</b>	
Building/Property Name:	
Flat/Unit details:	
Street or Lot number:	
Street Name:	
Suburb, Location or Town:	
State/ territory:	Postcode:
<b>5. What is your Postal Address (if different from above)?</b>	
Building/Property Name:	
Flat/Unit details:	
Street or Lot number:	
Street Name:	
Postal delivery information:	
Suburb, Location or Town:	
State/ territory:	
Postcode:	
<b>Emergency Contact:</b>	
Name:	Contact Number:
Street Address:	Suburb:
State:	Postcode:

**Address:** Level 2, 133-135 Oxford Street  
Bondi Junction NSW 2022  
**Ph** +61 2 8065 2990

**ABN:** 49 151 579 341  
**CRICOS** 03360G

V 1.0

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## B. Language and Cultural Diversity

6. In which country were you born?

1101 Australia

Other - please specify \_\_\_\_\_

7. Do you speak a language other than English at home?

(If more than one language, indicate the one that is spoken most often)

1201 No, English only- **Go to question 9**

Yes, other - please specify: \_\_\_\_\_

8. How well do you speak English?

1 Very well

2 Well

3 Not well

4 Not at all

9. Are you of 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

## C. Disability

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

Yes

No - Go to Question 12

11. If YES, then please indicate the areas of disability, impairment or long-term condition:  
(You may indicate more than one area)

11 Hearing/Deaf

12 Physical

13 Intellectual

14 Learning

15 Mental Illnesses

16 Acquired Brain Impairment

17 Vision

18 Medical Conditions

19 Other

## D. Schooling

12. What is your highest COMPLETED school level? (Tick ONE box only)

12 Year 12 or equivalent

11 Year 11 or equivalent

10 Year 10 or equivalent

09 Year 9 or equivalent

08 Year 8 or below

02 Never attended school - Go to Question 14

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

14. Are you still attending secondary school?

Yes

No

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## E. Previous Qualifications Achieved

15. Have you **SUCCESSFULLY** completed any of the following qualifications?

- Yes       No if NO- go to question 17

16. If YES, then tick ANY applicable boxes.

- 008 Bachelor Degree or Higher Degree  
 410 Advanced Diploma or Associate Degree  
 420 Diploma (or Associate Diploma)  
 511 Certificate IV (or Advanced Certificate/Technician)  
 514 Certificate III (or Trade Certificate)  
 521 Certificate II  
 524 Certificate I  
 990 Certificates other than the above

## F. Employment

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

(Tick **ONE** box only)

- 01 Full-time employee  
 02 Part-time employee  
 03 Self-employed - not employing others  
 04 Employer  
 05 Employed - unpaid worker in a family business  
 06 Unemployed - seeking full-time work  
 07 Unemployed - seeking part-time work  
 08 Not employed - not seeking employment

## G. Study Reason

18. Of the following categories, which **BEST** describes your main reason for undertaking this course/ traineeship/ apprenticeship? (Tick **ONE** box only)

- 01 To get a job  
 02 To develop my existing business  
 03 To start my own business  
 04 To try for a different career  
 05 To get a better job or promotion  
 06 It was a requirement of my job  
 07 I wanted extra skills for my job  
 08 To get into another course of study  
 12 For personal interest or self-development  
 11 Other reasons

## H. Your Course of Study

CRICOS Name & Code:

Expected Course Duration:

Commencement Date:

Expected Completion Date:

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## I. Your Credit Transfer and Recognition of Learning (RPL)

19. Are you applying for Credit Transfer or RPL for the units successfully completed at another provider?

Yes  No

If **Yes**, please complete Credit Transfer or RPL application form and submit it to the Student Administration with supporting documents such as official transcript or statement of attainment.

## J. Receipt of HIBT'S Policies & Procedures

20. I acknowledge that I have and will read and be familiar with the following policies and procedures of HIBT:

- a. Fee Payment Policy and Procedure
- b. Fee refunds policy
- c. Students' complaints and appeal policy
- d. Students' withdrawal, deferral and suspension policy
- e. Satisfactory course progress policy
- f. Critical incident policy and procedure

21. I am well informed that HIBT is responsible for compliance of training and assessment and for issuance of AQF certification documentation.

22. I am also aware of my rights as per the TPS policy if the HIBT closes or ceases to deliver the agreed training and/or assessments.

## K. Important Excerpts from Free Payment, Late Assessment Submission and Plagiarism Policy

23. I am aware that I should pay the tuition fee of each term in full amount within the last two weeks of the current term (study period) and within one working week (5 working days) of the start of the next term. A late payment fee of \$50 will be levied to me if I pay fees by 10 working days (WDs) after the start of the next term for the current term. If I do not pay my fees by 10 WDs, I will be issued a warning letter indicating that I need to pay my outstanding fees plus a late payment fee of \$100 by 20 WDs after the start of the next term for the current term; otherwise my CoEs may be cancelled.

24. Students must submit "competent" assessments by due dates; otherwise, they will incur a fine of \$50.00 per Unit (if submitted within one week after the due date) followed by \$100.00 per Unit (if submitted within two weeks after the due date) and \$150.00 per Unit (if submitted within one month after the due date). If you don't submit "competent" assessments even by one month, or do not pay fines, HIBT may report to DIBP as against non-completion of "competent" assessments and non-payment of fees and fines, and it may affect your student visa.

25. Plagiarism is not accepted in Australian education system and at HIBT. You should not practice any plagiarism in your assessments or any other works. If you are found to practice plagiarism, or your assessment has been found to be plagiarised, you will be fined \$250 (for first time) followed by \$500 (for second time) and \$1000 (for third time). If you are still found to be plagiarised after the third time, HIBT will report to DIBP as against plagiarism and it may affect your student visa.

## L. Student Declaration

I declare that all information provided in this application is complete and correct. I understand that failure to provide incorrect information or documentation in relation to this application may result in cancellation of my enrolment.

### Emergency Medical Indemnity

I also authorise Hamro College or their representative to obtain Medical Treatment in the event of an emergency. I indemnify Hamro College or their representative.

### Use of photos

I give my permission to Hamro College to use my ID or any other photos taken during college events in social media if the intended use is for promoting the status of college and its marketing activities.

<b>Signature of Student:*</b>	<b>Signature of parent or legal guardian:*</b>	<b>Date:</b>

\*Note: This application and declaration must be signed by a parent or legal guardian if the student is under 18 years of age at the time of application. Student must be at least 18 years of age at the time of arrival in Australia.

<b>OFFICE USE ONLY</b>	<input type="checkbox"/> Student Activated	<input type="checkbox"/> SMS Updated
Date:	<input type="checkbox"/> ID issued	