EXPRESSION OF INTEREST FORM

PLEASE COMPLETE ALL SECTIONS IN BLOCK LETTERS

Campus Location:	Melbourne	e Hobart



A DEDCOMAL DETAILS							
A PERSONAL DETAILS							
Family name:	Address in Your Home Country:						
(as stated in your passport)							
Given name (s):	Country						
Nationality:	Country:						
Date of birth*: Country of birth: (dd/mm/yyyy)							
City of Birth:	Telephone: ()Mobile:						
Gender: Male Female	Fax: () E-mail:						
First Language:	- L-11Idili						
Languages spoken at home:	Mailing Address in Australia (if different)						
*Student must be at least 18 years of age at the time of arrival in Australia.	Street address:						
	Suburb: State: Postcode:						
Address in Australia (if known)							
	Telephone: ()						
Street Address:	Mobile:Fax: ()						
Suburb:	E-mail:						
	Do you have any disabilities or medical conditions? Yes No						
Telephone: ()	If 'Yes', please specify:						
Mobile:Fax: ()							
E-mail:	Will it impact your ability to study? Yes No						
D							
Do you have a Unique Student Identifier Number? Yes, please specify							
No If 'No', I will create myself (please visit www.usi.gov.au)	I authorise RGIT to create on my behalf (please fill USI Consent Form)						
B PASSPORT AND VISA DETAILS							
Passport number:	Are you currently in Australia: Yes No						
Expiry date:	If yes, state your visa type:						
(dd/mm/yyyy)	Student, visa subclass: Spouse Visitor						
Country of citizenship:	Other: Please specify:						
Do you have a valid Overseas Student HealthCover (OSHC)? Yes No	Have you applied for permanent residency in Australia? Yes No						
	Trave yee applied for permanerii residency ii 7 tesindiid.						
	Have you had your visa refused in the past? Yes No						
C COURSE OF STURY	Have you had your visa refused in the past? Yes No						
C COURSE OF STUDY	Have you had your visa refused in the past? Yes No						
C COURSE OF STUDY Please list the course/s you are applying for to study at RGIT Australia.	Have you had your visa refused in the past? Yes No						
	Have you had your visa refused in the past? Yes No Course Duration Proposed Commencement Date						
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Please list the course/s you are applying for to study at RGIT Australia. CRICOS Code Name of the Course D REASON FOR CHOOSING THIS COURSE/S (please To get a job	Course Duration Proposed Commencement Date (e.g. July 2019) Tick one only) U wanted extra skills for my job Other reasons						
Please list the course/s you are applying for to study at RGIT Australia. CRICOS Code Name of the Course D REASON FOR CHOOSING THIS COURSE/S (please) To get a job To try for a different career To develop my existing business To get a better job or promotion	Course Duration Proposed Commencement Date (e.g. July 2019) Tick one only)						
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Please list the course/s you are applying for to study at RGIT Australia. CRICOS Code Name of the Course D REASON FOR CHOOSING THIS COURSE/S (please To get a job To try for a different career To develop my existing business To start my own business It was a requirement of my job	Course Duration Proposed Commencement Date (e.g. July 2019) Tick one only) I wanted extra skills for my job Other reasons To get into another course of study For personal interest or self-development						

Agent Code/Stamp

Last Reviewed: March 2024

E Overse	eas Stuc	dent Hec	lth Cov	er											
Do you want RGIT			eas Student (complete		/er – this i	s a com	pulso	ry visa	requir	ement					
Part A – Insurer De	tails														
Name of Insurer:															
Member Number:												-			
Date of Expiry:												_			
	<u>-</u>											_			
Part B – Royal Gree	enhill Institu	te of Techno	logy (RGIT)	Australia tc	arrange										
Cover Type – Single:	The length of your OSHC MUST cover the total length of your course(s)														
Cover Type – Single:	☐ The length of your OSHC MUST cover the total length of your course(s)														
Cover Type – Family:	☐ The length of your OSHC MUST cover the total length of your course(s)														
The Australian Health Cover		ent requires	all persons e	entering Au	ıstralia on	a Stude	nt Vis	a to ho	ave O	verseas (Student				
F ENGLIS	H LANC	GUAGE F	ROFICI	ENCY											
Please tick (✓) wh	ich of the f	ollowing app	lies to you.	Attach rele	vant evic	dences/	docu	menta	ation to	support	your sel	ections.			
☐ I have co		guage. recognized an ELICOS o			Name	-	est (e.	g.IELTS,	TOEFL):		,	econdary, Test sco	,	studies.	=
Please make sure	you refer to	o the specific	entry requi			•					These re	quirement	s are de	tailed in the	9
student prospectu Please provide de				ast educati	on includ	ing the h	nighe	st qual	lificatio	n reach	ed or co	mpleted.			
G EDUCA	TION HI	STORY													
Year Completed		Name of Sc	:hool/Institu	tion		State/	'Cour	ntry		Nam	e of Qua	alification		Course I	Duration
H EMPLO	VMENT	HISTORY													
				nt omploye	mont Att	ach a so	para	to paa	o if no	corran					
Please provide de	eraiis aria a	ocuments of	your releva	ni employi	neni. And	ach a se	para	ie pag	je ii ne	cessary.					
Date Employed (e.g. Mar 13 – Feb				Country of raton Pty Ltd,	' '	-				Positio	n		Duties	5	
	,				,										
I REQUES	STS AND	PREFER	ENCES												
Do you want RGIT	Australia to	o organize yo	ur accomm	nodation?				Yes		No					
If yes, what type o	of accomm	odation do y	ou need?		Homes	itay		Sharin	ıg with	others] Apartme	nts, units	and flats	
Would you like RG	IT Australia	to provide y	ou an airpo	rt pick-up?				Yes		No					
Please indicate yo					o meet this	request):		Week	days			Weeken	ds		
J MEDIA	CONS	ENT													
From time to time, the student is invo broadcast media marketing collater	lved in an o such as do	activity. These coments, stu	e creations in dent maga	may be use ızine, websi	ed in a clo te, RGIT T	assroom V, newsl	or on etters	-the-jo , displo	b worl	c activitie ırnals, pr	es or cou ofession	ıld be publ al develop	ished by ment mo	RGIT in prinaterials for t	nt, digital or
I do consent	to RGIT Au	stralia using o	any of the a	bove mate	rials invol	ving me	for th	ne purp	oses c	outlined	above.				
I do not cons	ent to RGIT	Australia usi	ng any of th	ne above m	naterials i	nvolving	me f	or the p	purpos	es outlin	ed abov	e.			

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Greenhill Education Group Pty Ltd t/a RGIT Australia. National Provider No.: 22088 ABN: 68 127 999 160 CRICOS Code: 03002G

K STUDENT DECLARATION							
I confirm that I have read and understoo Student Prospectus or information provided (www.rgit.edu.au) which details information a course entry requirements, English entry requi I also understand the Fees Payment and Rexplanation of what occurs, if for some unfois not delivered. I confirm that I am fully aware of the Fees Payment and Privacy Statemer Policy and Procedure, available at www.rgagree to abide by as a student at RGIT Austraudent I understand and accept that in the event on fraudulent or deceptive grounds ruled thome Affairs, no refund of fees are payable.	on RGIT Australia website about the ESOS framework, rements, LLN requirements. efund policy, including an oreseen reason, the course ayment and Refund Policy, ent as set out in the Privacy git.edu.au/policies, which I alia. my student visa is rejected out by the Department of	I understand that I am not required to pay more than the initial tuition fee amount as stated on this offer letter (or 50% of the tuition fee) before the start of the course. However, I am also aware that I have a choice to pay more than 50% of the tuition fees or the full course fees upfront if I choose to do so. Any amount of fees paid before the start of the course will be reflected in my Confirmation of Enrolment (CoE). I declare that all information provided in this expression of interest incomplete and correct. I understand that failure to provide correct information or documentation in relation to this expression of interest may result in cancellation of my enrolment.					
Signature of Student*	Signature of Parent or Le	egal guardian*	Date(dd/mm/yyyy)				
*Note: This expression of interest and declaration must be must be at least 18 years of age at the time of arrival in A		dian if the student is under 18 years	of age at the time of expression of interest. Student				
Please return this completed Expression	n of Interest Form to:	Office Use only	y				
Street Address: 28-32 Elizabeth Street, Melbourne Postal Address: GPO Box 5466 Melbourne VIC 30 Phone: +61 3 8639 9000 Fax: +61 3 8639 9001 Email: admissions@rgit.edu.au Web: www.rgit.ed	01	Student File No. Offer Number Expression of int	: : erest assessed by:				

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