

GENUINE TEMPORARY ENTRANT FORM

Personal Details:	
Title: OMr. Miss Mrs. Ms. Other:	Gender: 🗆 Male 🗆 Female 🗆 Other
Family Name:	Given Name:
Date of Birth:	Passport Number:
Nationality:	
	•

Agent Details:	
Agency Name:	Counsellor:
Contact Email:	Date of Interview:

Application Checklist:

		□ YES	□ NO
2.	Can you confirm as the student's counsellor that all supporting docume	ents are true and ce	rtified copies of the originals?
		U YES	
3.	Do the supporting documents have the stamp of your organization?		
		□ YES	□ NO
••	Have you counselled the student on their chosen program/s?		
		□ YES	
	If yes, please specify how (personal, phone call, email etc):		

Admissions Requirements Checklist:

5.	Does the student meet the English language requirements for the	eir chosen program(s)?	
			□ NO
6.	Have you explained the program to the student including costs, t	metable, duration, prog	ress, attendance, requirements
	and completion?	□ YES	
7.	Does the student understand that they must maintain OSCH for t	hemselves and any dep	endents for the duration of their
	stay in Australia?	□ YES	□ NO



Student Information

- 1. Have you read the costs associated with the living in Australia as outlined at <u>https://www.border.gov.au/Trav/Stud/More/Student-Visa-</u> Living-Costs-and-Evidence-of-Funds ? □ YES □ NO
- Have you determined that you have access to funds while living in Australia that will cover your tuition and your living costs? *If yes, please provide details of the dependents:* YES
 NO
- 3. What is the source of the funds? (bank loan, parents, scholarship, etc.)_*Please attach proof of Financial capability.
- 4. Are you coming to Australia for any other reason apart from studying? *If yes, please provide details:*

		□ YES		
5.	Have you researched other study options to ensure that your s	selected program is the best for y	our desired goals?	
		□ YES	□ NO	
6.	Do you understand that when you enter Australia under a stud	dent visa you are required to retu	rn home at	
	the completion of your studies?	□ YES	□ NO	
8.	Have you studied or travelled to Australia before? If yes, please	se specify the time of travel and ty	/pe of visa (Tourist, Workii	ng
	Holiday, Student etc.):	□ YES	□ NO	

9. <i>10.</i>	Do you have any criminal, civil or legal pending cases? Are you coming to Australia with any dependents? <i>If yes, please</i>	□ YES provide details of the depen	□ NO dents:	
		□ YES	□ NO	
11.	Have you or any of the accompanying family/dependents ever b		• • •	
	or Canada) If yes, please provide details.	□ YES	□ NO	

SMEAG Australia Pty, Ltd t/a CAMBERWELL COLLEGE

Lv1, 318 King St Melbourne VIC 3000, Phone: +61 1300 794 230, Email: info@camberwellcollege.com.au

Web: www.camberwellcollege.com.au, CRICOS Code: 03718D ABN: 84 623 146 092

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12.		e you or any of the accompanying family/dependents ever been refused a student visa to Australia? If yes, please attach			
	documentation	□ YES			
13.	Do you have relatives in Australia? <i>If yes, please provide details</i>	□ YES	□ NO		
14.	Do you and/or any of the accompanying family/dependents have visa being granted?	e any medical or heal	th issues that may prevent a student		
Plea 1.	ase answer the following with your own words: How will you benefit from this program in your future?				
2.	Why have you chosen to study in Australia?				
3.	Why have you chosen to study with Camberwell College?				



4. What benefits will you have from studying in Australia after you go back to your home country?

5. What attachments do you have to your home country?

Agent Declaration:		
I,	declare tl	nat,
 I have assessed and concluded, to home country, and their potential of Department of Home Affairs. Where applicable I am satisfied the All information and documentation 	o the best of my knowledge, that the circumstances in Australia, that the a nat the student meets with requiren on provided in this application is true	e in consideration of the student's circumstances in their applicant is Genuine Temporary Entrant as defined by the ments for a student visa. e and correct to the best of my knowledge. e outcome of the application that I will notify Camberwell
Representative Name:	Date:	Signature:
Student Declaration:		
I declare that. □ I confirm that the responses prov	ided above are true and correct to t	he best of my knowledge.
	Date:	Signature:

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