DOMESTIC STUDENT APPLICATION FORM

Personal Details

Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐   **Surname:**

Given Name(s):

Street or Postal Address:

Suburb/Town: **State:**   **Post Code:**

Date Of Birth: **e-mail:**

Home Ph: **Mobile:**   Male ☐ or Female ☐

Employment Details (if applicable)

Employment status: Full Time ☐   Part Time ☐

Employer Name: **Contact Name:**

Business Address: **Suburb/Town:**

State: **Post Code:**   **Phone:**   **Fax:**   **E-mail:**

Language & Cultural Diversity

In which country were you born?   Australia ☐ Other ☐, please specify …

Citizenship: Australian Citizen ☐   Permanent Australian Resident ☐   Temporary Australian Resident ☐

Do you speak a language other than English at home? No ☐ Yes ☐, please specify …

If yes, how well do you speak English?   Very well ☐ Well ☐ Not well ☐ Not at all ☐

Are you of Aboriginal or Torres Strait Islander Origin?   No ☐ Aboriginal ☐ TSI ☐

Schooling & Further Education (prior learning) LUI Number:_____

What is your highest COMPLETED level of schooling?   Year 12 ☐ Year 11 ☐ Year 10 ☐ Year 9 ☐

In which year did you complete school?   **Are you still attending school?** No ☐ Yes ☐

Prior Achievements: Have you SUCCESSFULLY completed any of the following:

If yes, then tick the appropriate: COMPLETED   COMPLETED

	COMPLETED		COMPLETED
Bachelor Degree or Higher Degree	☐	Certificate III (or Trade Certificate)	☐
Advanced Diploma or Associate Degree	☐	Certificate II	☐
Diploma (or Associate Diploma)	☐	Certificate I	☐
Certificate IV (or Advance Certificate/Technician)	☐	Certificates other than above	☐

Disabilities

Do you consider yourself to have a permanent & significant disability?   No ☐ Yes ☐

If yes, please tick any of the following that apply to you: Hearing ☐   Physical ☐   Vision ☐

Intellectual ☐   Mental Illness ☐   Medical Condition ☐   Acquired Brain Injury ☐   Other ☐

Qualification applied for (Course)

Double Diploma of Hospitality & Diploma of Events ☐   Other:_____ ☐

Required attachments:

Resume ☐   Qualification/s and/or Statements of Attainment ☐   Letters/Certificates of employment (if any) ☐

Terms & Conditions of Enrolment

By signing this enrolment form you are acknowledging that all the information provided in this application is true and correct. I agree that CTIA accepts my application subject to the Rules and Regulations of the College. I give my permission to the College to pass my relevant information concerning any results and progress at the College to my parents/guardian and the human resources departments of hotels in which I complete my industry training. Incorrect information/documentation may result in the cancellation of my enrolment.

Please sign below to indicate that you have read and understood the terms & conditions of enrolment:

Trainee Signature: _____   **Date:**

Parent/Guardian Signature: _____   **Date:**
    (if under 18 years old)

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