



Application for general tourists to
visit Australia for tourism
or other recreational activities

Form

48R

Please use a pen, and write neatly in English using BLOCK LETTERS.

Tick where applicable ☒

PHOTOGRAPH

Please attach a recent
photograph of yourself
AND
any children who are on
your passport and will
be travelling with you.

1 When do you wish to visit Australia?

From

| | | |
|-----|-------|------|
| DAY | MONTH | YEAR |
| | | |

 to

| | | |
|-----|-------|------|
| DAY | MONTH | YEAR |
| | | |

2 How long do you wish to stay in Australia?

Up to 3 months ☐
Up to 6 months ☐
Up to 12 months ☐

3 Do you intend to enter Australia on more than one occasion?

No ☐

Yes ☐ Give details

| |
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Part A – Your details

4 Name(s) as shown in your passport

Family name

| |
|--|
| |
|--|

Given names

| |
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Other names you are, or have been, known by
(including name at birth, previous married names, aliases)

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Name in your own language or script (if applicable)

| |
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| |
| |

5 Sex Male ☐ Female ☐

6 Date of birth

| | | |
|-----|-------|------|
| DAY | MONTH | YEAR |
| | | |

If you are 75 years or over, you will be asked to undergo a health assessment and may be asked to show that you have medical insurance to cover your stay in Australia. Please contact an Australian overseas mission for further advice before lodging your application. If additional medical consultations are required, a decision on your visa application will be delayed.

7 Relationship status

Married ☐

Separated ☐

Never married or
been in a de facto
relationship ☐

Engaged ☐

Divorced ☐

De facto ☐

Widowed ☐

8 Place of birth Town/city

| |
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| |
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Country

| |
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9 Details from your passport

Passport number

| |
|--|
| |
|--|

Country of passport

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| |
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Date of issue

| | | |
|-----|-------|------|
| DAY | MONTH | YEAR |
| | | |

Date of expiry

| |
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Issuing authority/Place of issue as shown in your passport

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Make sure your passport is valid for the period of stay you are applying for.

10 Details of identity card or identity number issued to you by your government (if applicable) eg. National identity card.

Note: If you are the holder of multiple identity numbers because you are a citizen of more than one country, you need to enter the identity number on the card from the country that you live in.

Identity number

| |
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Country of issue

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| |
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11 Of which countries are you a citizen?

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12 Country of usual residence

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13 Your current residential address

Note: A post office box address is not acceptable as a residential address. Failure to give your residential address will result in this application being invalid.

| |
|----------|
| |
| |
| POSTCODE |

14 Address for correspondence

(If the same as your residential address, write 'AS ABOVE')

| |
|----------|
| |
| |
| POSTCODE |

15 Your telephone numbers

| | COUNTRY CODE | AREA CODE | NUMBER |
|-------------------------------|--------------|-----------|--------|
| Office hours | () | () | |
| After hours or mobile/cell | () | () | |

16 Do you agree to the department communicating with you by fax, e-mail or other electronic means?

No ☐

Yes ☐ Give details

Fax number

| COUNTRY CODE | AREA CODE | NUMBER |
|--------------|-----------|--------|
| () | () | |

E-mail address

| |
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Note: If this visa application is refused, you will be notified by mail

Part B – Children included

You can include in this application any **children included in your passport who will be travelling with you.**

Children under 18 years of age, travelling alone or without one or both of their parents or legal guardians, require notarised authorisation from the non-accompanying parent(s) or guardian(s) to travel to Australia.

17 Are there any children included in your passport who will be travelling with you?

No ☐

Yes ☐ Give details

1. Family name

Given names

Sex Male ☐ Female ☐

DAY MONTH YEAR

Date of birth

Country of birth

2. Family name

Given names

Sex Male ☐ Female ☐

DAY MONTH YEAR

Date of birth

Country of birth

3. Family name

Given names

Sex Male ☐ Female ☐

DAY MONTH YEAR

Date of birth

Country of birth

4. Family name

Given names

Sex Male ☐ Female ☐

DAY MONTH YEAR

Date of birth

Country of birth

If insufficient space, attach additional details.

Part C – Family NOT travelling with you

- 18** Do you have a spouse, de facto partner, any children, or fiancé who will NOT be travelling with you?

No ☐ Yes ☐ ► Give details

| Full name | Relationship to you | Date of birth | | | Their address while you are in Australia |
|-----------|---------------------|---------------|-------|------|--|
| | | DAY | MONTH | YEAR | |
| | | | | | |
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If you need more space, please attach a separate sheet with the details.

Part D – Details of your visit to Australia

- 19** Is it likely you will be travelling from Australia to a neighbouring country (eg. New Zealand, Singapore, Papua New Guinea) and back to Australia?

No ☐ Yes ☐ ► Please attach itinerary details

- 20** Do you have any relatives, friends or contacts in Australia?

No ☐ Yes ☐ ► Give details

| Full name | Relationship to you | Date of birth | | | Address | Citizen or permanent resident of Australia? (YES or NO) |
|-----------|---------------------|---------------|-------|------|---------|---|
| | | DAY | MONTH | YEAR | | |
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If you need more space, please attach a separate sheet with the details.

- 21** Why do you want to visit Australia?

Include details of any dates that are of special significance to your visit.

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- 22** Do you intend to do a course of study of more than 4 weeks while in Australia?

No ☐ Yes ☐ ► Give details

Name of the course

| |
|--|
| |
|--|

Name of the institution

| |
|--|
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How long will the course last?

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Part E – Health and character

Visitors to Australia must be of good health and of good character. The following questions ask you to make a declaration about the health and character of yourself and any other person included in your application. If your circumstances change before you travel you should inform the Australian visa office.

- 23** In the last 5 years, have you, or any other person included in this application, visited, or lived, outside your country of passport for more than 3 consecutive months?

No ☐

Yes ☐ ► Give details

1. Name

Country(s)

Date from DAY MONTH YEAR to DAY MONTH YEAR

2. Name

Country(s)

Date from DAY MONTH YEAR to DAY MONTH YEAR

3. Name

Country(s)

Date from DAY MONTH YEAR to DAY MONTH YEAR

- 24** Do you, or any other person included in this application, intend to enter a hospital or health care facility (including nursing homes) while in Australia?

No ☐

Yes ☐ ► Give details

- 25** Do you, or any other person included in this application, intend to work as, or study to be, a doctor, dentist, nurse or paramedic during your stay in Australia?

No ☐

Yes ☐ ► Give details

- 26** Have you, or any other person included in this application:

- ever had, or currently have, tuberculosis?
- been in close contact with a family member that has active tuberculosis?
- ever had a chest x-ray which showed an abnormality?

No ☐

Yes ☐ ► Give details

- 27** During your proposed visit to Australia, do you, or any other person included in this application, expect to incur medical costs, or require treatment or medical follow up for:

- blood disorder;
- cancer;
- heart disease;
- hepatitis B or C and/or liver disease;
- HIV infection, including AIDS;
- kidney disease, including dialysis;
- mental illness;
- pregnancy;
- respiratory disease that has required hospital admission or oxygen therapy;
- other?

No ☐

Yes ☐ ► Give details

- 28** Do you, or any other person included in this application, require assistance with mobility or care due to a medical condition?

No ☐

Yes ☐ ► Give details

29 Have you, or any other person included in this application, ever:

- been convicted of a crime or offence in any country (including any conviction which is now removed from official records)? No ☐ Yes ☐
- been charged with any offence that is currently awaiting legal action? No ☐ Yes ☐
- been acquitted of any criminal offence or other offence on the grounds of mental illness, insanity or unsoundness of mind? No ☐ Yes ☐
- been removed or deported from any country (including Australia)? No ☐ Yes ☐
- left any country to avoid being removed or deported? No ☐ Yes ☐
- been excluded from or asked to leave any country (including Australia)? No ☐ Yes ☐
- committed, or been involved in the commission of war crimes or crimes against humanity or human rights? No ☐ Yes ☐
- been involved in any activities that would represent a risk to Australian national security? No ☐ Yes ☐
- had any outstanding debts to the Australian Government or any public authority in Australia? No ☐ Yes ☐
- been involved in any activity, or been convicted of any offence, relating to the illegal movement of people to any country (including Australia)? No ☐ Yes ☐
- served in a military force or state sponsored/private militia, undergone any military/paramilitary training, or been trained in weapons/explosives use (however described)? No ☐ Yes ☐

If you answered **'Yes'** to any of the above questions, provide all the relevant details. If insufficient space, attach an additional statement.

Part F – Employment status

30 What is your employment status?

| | | | | | |
|---|--|-------------------|--------|------|--|
| Employed/self-employed <input type="checkbox"/> | Details of employer/business | Name | | | |
| | | Address | | | |
| | | Telephone number | | | |
| | | Position you hold | | | |
| | How long have you been employed by this employer/business? | YEARS | MONTHS | | |
| Retired <input type="checkbox"/> | Year of retirement | DAY | MONTH | YEAR | |
| Student <input type="checkbox"/> | Your current course | | | | |
| | Name of educational institution | | | | |
| | How long have you been studying at this institution? | YEARS | MONTHS | | |
| Other <input type="checkbox"/> | Please provide details | | | | |
| Unemployed <input type="checkbox"/> | Please provide details of your last employment (if applicable) | | | | |

Part G – Evidence of funds

All visitors to Australia must be able to demonstrate they have adequate funds to cover all costs associated with their visit. Providing evidence of funds with a completed application will often help expedite the processing of a visitor visa application. Examples include showing personal bank statements, pay slips, audited accounts, taxation records or details of the funds that visitors will be taking with them or available to them (ie. how much in cash, traveller cheques and credit card limit).

31 How will you be maintaining yourself financially while you are in Australia?

| |
|--|
| |
|--|

32 Is someone else providing support for your visit to Australia?

No ☐ Go to Part H

Yes ☐ Give details

| Full name | Relationship to you | Date of birth | | | Their address while you are in Australia |
|-----------|---------------------|---------------|-------|------|--|
| | | DAY | MONTH | YEAR | |
| | | | | | |
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If you need more space, please attach a separate sheet with the details.

33 What support are they providing? Financial ☐ Accommodation ☐ Other ☐ Please attach details

The person or people you have listed will need to provide evidence of their ability to provide this support.

Part H – Previous applications

34 Have you, or any other person included in this application, ever:

- been in Australia and not complied with visa conditions or departed Australia outside your authorised period of stay?
- had an application for entry to or further stay in Australia refused, or had a visa for Australia cancelled?

No ☐ Yes ☐ ► Give details

| |
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35 Complete the following details if you (or any other person included in this application) have applied for **permanent** entry to Australia in the last 5 years

| Month and year | Place of application | Type of visa applied for | Was a visa granted? (YES or NO) |
|----------------|----------------------|--------------------------|------------------------------------|
| | | | |
| | | | |
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36 Complete the following details if you (or any other person included in this application) have applied for **temporary** entry to Australia in the last 5 years

| Month and year | Place of application | Type of visa applied for | Was a visa granted? (YES or NO) |
|----------------|----------------------|--------------------------|------------------------------------|
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Part I – Assistance with this form

37 Did you receive assistance in completing this form?

No ☐ ► Go to Part J

Yes ☐ ► Please give details of the person who assisted you

Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

Family name

Given names

Address

| |
|----------|
| |
| |
| POSTCODE |

Telephone number or daytime contact

COUNTRY CODE AREA CODE NUMBER

Office hours () ()

Mobile/cell

38 Is the person an agent registered with the Office of the Migration Agents Registration Authority (Office of the MARA)?

No ☐

Yes ☐ ► Go to Part J

39 Is the person/agent in Australia?

No ☐ ► Go to Part J

Yes ☐

40 Did you pay the person/agent and/or give a gift for this assistance?

No ☐

Yes ☐

Part J – Options for receiving written communications

41 All written communications about this application should be sent to:
(Tick one box only)

Myself ☐ ► All written communications will be sent to the address for communications that you have provided in this form.

OR

Authorised recipient ☒

OR

Migration agent ☐ ►

OR

Agent exempt from registration ☐

You must complete form 956 *Appointment of a migration agent or exempt agent or other authorised recipient* and attach it to this application form. Form 956 is available from the department's website **www.immi.gov.au**

Part K – Payment details

42 How will you pay your application charge?

If applying **in Australia**, debit card or credit card are the preferred methods of payment. Debit cards cannot be used for applications lodged by mail. If paying by bank cheque or money order please make payable to the Department of Immigration and Citizenship.

If applying **outside Australia**, please check with the Australian Government office where you intend to lodge your application as to what methods of payment and currencies they can accept and to whom the payment should be made payable.

Bank cheque ☐

Money order ☐

Debit card ☐ Cannot be used for applications lodged by mail

Credit card ☐ Give details below

Payment by (tick one box)

Australian Dollars

| | |
|---|----------------------------------|
| Mastercard <input type="checkbox"/> Diners Club <input type="checkbox"/> American Express <input type="checkbox"/> JCB <input type="checkbox"/> Visa <input type="checkbox"/> | <input type="text" value="AUD"/> |
|---|----------------------------------|

Credit card number

| |
|---|
| <div style="display: flex; justify-content: space-around; padding: 5px;"> 123456789101112131415161718192021222324252627282930313233343536373839404142434445464748495051525354555657585960616263646566676869707172737475767778798081828384858687888990919293949596979899100 </div> |
|---|

Expiry date MONTH / YEAR

Cardholder's name

| |
|--|
| |
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Telephone
number

| COUNTRY CODE | AREA CODE | NUMBER |
|--------------|-----------|----------|
| 1 | 202 | 452-1234 |
| 1 | 202 | 452-1235 |
| 1 | 202 | 452-1236 |
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| 1 | 202 | |

() ()

Address

| |
|----------|
| |
| |
| POSTCODE |

**Signature of
cardholder**

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Credit card information will be used for charge paying purposes only.

Part L – Declaration

WARNING: Giving false or misleading information is a serious offence.

43 Having read the 'Conditions for a tourist visa to Australia' on page 2 of this form:

- *I understand that the visa I am applying for does not permit me to work or undertake business activities in Australia.*
- *I understand that the visa I am applying for does not permit me to study for longer than 3 months in Australia.*
- *My intention to visit Australia is genuine and I will abide by the conditions and period of stay of the visa.*
- *I have adequate funds to meet all costs associated with the visit to and from Australia for all those included in this application.*
- *I have truthfully declared all relevant details requested of me in this application.*
- *I understand that the effect of the 8503 visa condition is that it will not be possible for me to apply to remain in Australia beyond the authorised period of stay of my visa. I agree to having this condition included on any visa issued to me as a result of this application.*
- *I acknowledge that I understand that if the 8503 visa condition is imposed on my visa, it will be indicated on the visa label, or in documents given to me by the department about the grant of my visa, by the condition code '8503' and by the short description 'No Further Stay'.*
- *I acknowledge that this means that the 8503 condition has been imposed on my visa, that I am required to depart Australia before the end of the period of stay authorised by my visa and that I understand the restriction that condition 8503 places on me.*
- *In any part of this form which has been completed with the assistance of another person, I declare that the information as set down is true and correct and has been included with my full knowledge, consent and understanding.*
- *If granted a visa, I will advise the overseas mission should my circumstances change prior to my travel to Australia.*

**Signature
of applicant**

| |
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| |
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Date

| | | |
|-----|-------|------|
| DAY | MONTH | YEAR |
| | | |

If you are unable to collect your passport, you will need to make adequate arrangements for its return to you.

We strongly advise that you keep a copy of your application and all attachments for your records.



Appointment of a migration agent or exempt agent or other authorised recipient

Form
956

Part A – Applicant details

Personal details of the main visa applicant, sponsor or nominator, and all other applicants included on this application, who are appointing the same migration agent or exempt agent or authorised recipient.

1 Main applicant/Sponsor or nominator

| | | | | | | | |
|-------------------------------------|--|----------------------|----------------------|----------------------|--------------------------|--------------------------|----------------------|
| Family name | <input type="text"/> | | | | | | |
| Given names | <input type="text"/> | | | | | | |
| Organisation (if applicable) | <input type="text"/> | | | | | | |
| Date of birth | <table><tr><td>DAY</td><td>MONTH</td><td>YEAR</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></table> | DAY | MONTH | YEAR | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| DAY | MONTH | YEAR | | | | | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | | | | | |
| Current residential address | <table><tr><td><input type="text"/></td></tr><tr><td><input type="text"/></td></tr><tr><td><input type="text"/></td></tr><tr><td>POSTCODE</td></tr></table> | <input type="text"/> | <input type="text"/> | <input type="text"/> | POSTCODE | | |
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| Postal address | <table><tr><td><input type="text"/></td></tr><tr><td><input type="text"/></td></tr><tr><td><input type="text"/></td></tr><tr><td>POSTCODE</td></tr></table> | <input type="text"/> | <input type="text"/> | <input type="text"/> | POSTCODE | | |
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| POSTCODE | | | | | | | |
| Telephone number or daytime contact | | | | | | | |
| Office hours | <table><tr><td>COUNTRY CODE</td><td>AREA CODE</td><td>NUMBER</td></tr><tr><td>(<input type="text"/>)</td><td>(<input type="text"/>)</td><td><input type="text"/></td></tr></table> | COUNTRY CODE | AREA CODE | NUMBER | (<input type="text"/>) | (<input type="text"/>) | <input type="text"/> |
| COUNTRY CODE | AREA CODE | NUMBER | | | | | |
| (<input type="text"/>) | (<input type="text"/>) | <input type="text"/> | | | | | |
| Mobile phone | <input type="text"/> | | | | | | |
| E-mail address | <input type="text"/> | | | | | | |

2 Dependant applicants

Note: Any applicant 16 years or older who has a different migration agent or exempt agent or authorised recipient needs to use a separate form 956. Only include here the details for dependants using the same migration agent or exempt agent or authorised recipient.

Applicant 2

| | |
|-------------|----------------------|
| Family name | <input type="text"/> |
| Given names | <input type="text"/> |

Applicant 3

| | |
|-------------|----------------------|
| Family name | <input type="text"/> |
| Given names | <input type="text"/> |

Applicant 4

| | |
|-------------|----------------------|
| Family name | <input type="text"/> |
| Given names | <input type="text"/> |

Applicant 5

| | |
|-------------|----------------------|
| Family name | <input type="text"/> |
| Given names | <input type="text"/> |

If you have more than 5 applicants, attach a separate sheet.

Part B – About your application

- 3 Are you submitting this form with an application:
- you have already lodged? ☐ ► Go to Part C
- you are about to lodge? ☒ ► Go to Part D

Part C – Details of lodged application

- 4 What application have you lodged?
Provide category (eg. student, visitor, temporary business, permanent residence)

At which office was that application made?

- 5 Provide **one** of the following:

| | |
|------------------------------|----------------------|
| Client number | <input type="text"/> |
| File number | <input type="text"/> |
| Application receipt number | <input type="text"/> |
| Transaction reference number | <input type="text"/> |

Part D – Appointment details

- 6 Are you submitting this form because you want to:
- appoint a migration agent or exempt agent or authorised recipient? ☒
- change your migration agent or exempt agent or authorised recipient? ☐
- end the appointment of your migration agent or exempt agent or authorised recipient? ☐ ► Go to Part E
- Note: All documents will be sent directly to you.**
- 7 If appointing or changing your migration agent or exempt agent or authorised recipient, are you applying for a 2 stage visa? (eg. visa subclasses 309/100, 310/110, 820/801, or 826/814)
- No ☒ ► Go to Part E
- Yes ☐

- 8 Is your migration agent or exempt agent or authorised recipient appointed for the:

(tick **one** box only)

first stage? ☐

second stage? ☐

both the first and second stage? ☐

Note: You need to advise the department if these details change.

Part E – Migration agent or exempt agent or authorised recipient details

- 9 Provide details of the migration agent or exempt agent or authorised recipient

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other ☐ VisaHQ

Family name

Given names

Postal address

POSTCODE

Telephone number or daytime contact

Office hours

| COUNTRY CODE | AREA CODE | NUMBER |
|--------------|-----------|--------------------|
| (1) | (613) | 860-0894 ext. 6621 |

Mobile phone

- 10 If appointing, changing or ending the appointment of a migration agent or exempt agent provide (if applicable) their:

Business or company or organisation name

Migration Agent Registration Number (MARN)

(if this person is an Australian registered migration agent)

7 DIGITS

| | | | | |
|---|---|---|---|---|
| : | : | : | : | : |
|---|---|---|---|---|

OR

Offshore Agent ID Number

(if allocated by the department)

7 DIGITS

| | | | | |
|---|---|---|---|---|
| : | : | : | : | : |
|---|---|---|---|---|

- If appointing or changing your authorised recipient, go to Part G
- If ending the appointment of your migration agent or exempt agent or authorised recipient, go to Part K

- 11 Is your migration agent providing service under the Immigration Advice and Assistance Scheme (IAAAS)?

No ☒

Yes ☐

- 12 If your agent does not have a Migration Agent Registration Number (MARN) or offshore agent ID number, is he or she:

Exempt from registration by being:

(tick **one** box only)

a close family member (spouse, child, adopted child, parent, brother or sister) ☐

a sponsor or nominator for this visa application ☐

a member of parliament or their staff ☐

an official whose duties include providing immigration assistance (eg. a Legal Aid provider) ☐

a member of a diplomatic mission, consular post or international organisation ☐

an offshore agent ☐

OR

Other (eg. friend, education agent, travel agent, community volunteer or social worker etc.) ☒

Please specify

- 13 Did you pay the person/agent and/or give a gift for this assistance?

No ☐

Yes ☒

Part F – Authorisation for migration agent or exempt agent to act on your behalf

- 14 My migration agent or exempt agent is authorised to act on my behalf and receive written communication for my application (as permitted by law) in relation to:

(tick **one** box only)

all matters ☒
(for this application)

OR

for a specific matter only ☐ Give details
(for this application)

Note: A separate form 956 must be completed for each application lodged with the department.

- 15 If your application includes monitoring activity by the department (eg. sponsorship for a 457 or a Business Skills application), do you authorise your migration agent or exempt agent to act on your behalf in relation to this activity?

No ☒

Yes ☐

- If appointing an Australian registered migration agent, ie. your migration agent has a Migration Agent Registration Number (MARN), go to Part H

Part G – Health and character

- 16** Do you want your exempt agent or authorised recipient to receive health and/or character information about you, your spouse or your dependants, that may arise, or be revealed, in the course of this application?
(eg. requests for medical investigation, other health information about you, or the results of criminal history checks)

No ☒ ► These documents will be sent directly to you

Yes ☐

Part H – Migration agent or exempt agent or authorised recipient consent for appointment and electronic communication

Note: Do NOT complete Part H if you are ending the appointment of your migration agent or authorised recipient, go to Part K

- 17** As the migration agent or exempt agent or authorised recipient named on this form, do you agree to the department communicating with you by fax, e-mail or other electronic means?

No ☐

Yes ☒ ► Give details

Fax number

| COUNTRY CODE | AREA CODE | NUMBER |
|--------------|-----------|--------------------|
| (1) | (613) | 860-0894 ext. 6621 |

E-mail address

I understand and accept that I am appointed by the applicant, nominator or sponsor and dependants to receive all written communications and, if the appointed migration agent or exempt agent, act as his/her agent (as permitted by law).

Signature of migration agent or exempt agent or authorised recipient

| |
|--|
| |
|--|

Date

| DAY | MONTH | YEAR |
|-----|-------|------|
| | | |

Part I – Registered migration agent's client reference number

- 18** If you are appointed as the registered migration agent for this application, you may choose to provide your client reference number for correspondence with the department.

Client reference number (optional)

Part J – Other contact details

- 19** If the migration agent you have appointed is not available or ceases to practise, do you want to authorise the department to discuss your case with another migration agent from the same business, company or organisation?

No ☒ ► Go to Question 20

Yes ☐ ► Give details of other migration agent

Migration Agent Registration Number (MARN) or Offshore Agent ID number

| 7 DIGITS | | | | | | |
|----------|---|---|---|---|---|---|
| : | : | : | : | : | : | : |

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

Family name

Given names

Telephone number or daytime contact

Office hours

| COUNTRY CODE | AREA CODE | NUMBER |
|--------------|-----------|--------|
| () | () | |

Mobile phone

- 20** If your migration agent ceases to be registered, do you want the department to send written communications to you instead of to your appointed agent?

No ☐ ► The department will continue to send written communications to your appointed agent (as an authorised recipient) until you notify otherwise in writing

Yes ☒ ► Ensure you promptly notify the department of any changes to your postal address

Part K – Signature(s)

21 Signature(s) of main applicant, sponsor or nominator and all other applicants 16 years or older, included on this application, who are being represented by the same migration agent or exempt agent or authorised recipient.

Signature of main applicant

DAY MONTH YEAR

Date

Dependant applicants

Signature of applicant 2

DAY MONTH YEAR

Date

Signature of applicant 3

DAY MONTH YEAR

Date

Signature of applicant 4

DAY MONTH YEAR

Date

Signature of applicant 5

DAY MONTH YEAR

Date

We strongly advise that you keep a copy of your application and all attachments for your records.