

INSTRUCTIONS:

- Form must be filled in BLOCK Letters in English with a black or blue pen.
- Please complete all sections in this application form.
- Please write 'N/A' if a section does not apply to you.
- This application form is to be used by domestic students only.

Domestic Student Application Form For Higher Education

SECTION 1

PERSONAL DETAILS

Title (Mr/Ms/other) _____ First name _____

Surname _____

Date of birth

D	D	M	M	Y	Y	Y	Y
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 Gender Male Female Indeterminate

Mobile Phone Number _____ Home Phone Number _____

Email _____

Your citizenship status (Please tick the appropriate box)

- Australian Citizen New Zealand Citizen Permanent Resident of Australia Humanitarian Visa

Are you of Aboriginal or Torres Strait Islander descent? (Please tick the appropriate box)

- Yes, Aboriginal descent Yes, Torres Strait Islander descent Yes, both Aboriginal and Torres Strait Islander descent
 No

Do you have a disability, impairment or long-term medical condition (s) which may affect your studies? (Please tick appropriate box)

- Hearing Vision Mobility Learning Medical Other

If yes, would you like to receive advice on support services, equipment and facilities that may assist you? Yes No

Do you speak language(s) other than English at your home? Yes No

If yes, what is the main non-English language spoken at your home? _____

YOUR HOME ADDRESS (PLEASE WRITE THE ADDRESS AS IN YOUR BIRTH CERTIFICATE or PASSPORT)

Address _____

Suburb _____ Postcode _____

Country _____

POSTAL ADDRESS (IF SAME AS ABOVE - WRITE 'SAME AS ABOVE')

Address _____

Suburb _____ Postcode _____

Country _____

CURRENT RESIDENTIAL ADDRESS (IF SAME AS ABOVE - WRITE 'SAME AS ABOVE')

Address _____

Suburb _____ Postcode _____

Country _____

OTHER INFORMATION

Are you currently employed? Yes No

(If yes, please attach your resume, if you want Lyons College to consider your employment history in support of your application.)

How did you first learn about Lyons College? You may tick more than one box.

- VTAC guide VTAC website Internet Radio
 Newspaper/Magazine Career Advisor Relative or friend Exhibition/ Seminar
 Other - please specify _____

SECTION 2

COURSE PREFERENCE

Bachelor of Accounting

When do you wish to commence your studies?

- Trimester1 (March 2022 Intake) Trimester 2 (July 2022 Intake) Trimester3 (November 2022 Intake)
 Trimester _____ (_____ Intake, Year _____)

SECTION 3

EDUCATION AND OTHER DETAILS

Please list all previous studies you have attempted, completed, or not completed. You will need to attach certified or original documentary evidence of qualifications claimed below with this application. Documents not in English must be accompanied by certified translations of the documents.

SECONDARY STUDIES (E.G. YEAR 12)

Name of Qualification _____

Name of School _____

Country _____

Completion Status Completed Incomplete / Currently Studying Date completed or expected date of completion

M	M	Y	Y
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POST SECONDARY STUDIES (E.G. DIPLOMA/DEGREE/POST GRADUATE)

Name of Qualification _____

Name of Institution _____

Country _____

Completion Status Completed Incomplete / Currently Studying Date completed or expected date of completion

M	M	Y	Y
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ADDITIONAL POST SECONDARY STUDIES (E.G. DIPLOMA/DEGREE/POST GRADUATE)

Name of Qualification _____

Name of Institution _____

Country _____

Completion Status Completed Incomplete /Currently Studying Date completed or expected date of completion

M	M	Y	Y
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ADDITIONAL POST SECONDARY STUDIES (E.G. DIPLOMA/DEGREE/POST GRADUATE)

Name of Qualification _____

Name of Institution _____

Country _____

Completion Status Completed Incomplete /Currently Studying Date completed or expected date of completion

M	M	Y	Y
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Are you applying for Advance Standing or Credit Transfer? Yes No
(If yes, you must attach unit descriptions as per your transcripts and Lyons College's Credit Transfer Application Form)

Are you currently studying at another institute? Yes No

If yes, Name of Qualification _____

Name of Institution _____

Have you studied at Lyons College before? Yes, Student ID Number _____ No

SECTION 4

- DECLARATION AND APPLICATION CHECKLIST

Ensure certified copies of the following documents are attached at the time of submission

- Proof of Australian citizenship/ New Zealand citizenship/ Permanent Residency
- Academic results and certificates
- Proof of work experience (if applicable)
- MIT Credit Application form (if applicable)
- Unit descriptions, if applying for advanced standing or credit transfer
- Statement of purpose including gaps in studies (if applicable)

DECLARATION AGREEMENT

1. I declare that the information submitted with this application is complete and true. I acknowledge that failure to disclose my academic records may result in the Institute revoking an offer or terminating my studies at any stage.
2. I authorize the Institute to verify my academic and professional qualifications, and work experience.
3. I understand that at the time of enrolment I will be required to supply all original documents provided at the time of this application.
4. I confirm that I have received and read a copy of Lyons College current prospectus and information available on www.lyons.edu.au and fully understand the requirements of the course.
5. I have read, understood and consent to the Terms and Conditions of Enrolment and the Fee Payment and Refund Procedures at Lyons College .
6. I understand that this agreement and the availability of Lyons College's complaint and appeals processes do not remove my right to take action under Australia's consumer protection laws.
7. Australian Law states that applicants under 18 years of age must have signed consent from a Guardian or Parent. Please ensure all applications for students under the age of 18 are countersigned by Guardian or Parent.
8. I have read and understood Lyons College's Privacy Policy located at www.Lyons.edu.au and authorize Lyons College to collect, use and disclose my personal information as permitted or required by law and in accordance with the Lyons College's Privacy Policy.
9. I understand that the Institute reserves the right to alter any course, unit, entry requirements or fee without prior notice.
10. I understand that Lyons College makes no guarantee that I will be offered a place on my selected course or that places will be available for any particular course, and I acknowledge that Lyons College may impose limitations or conditions on enrolment in any course.

The above-mentioned information is true to the best of my knowledge and belief.

Signature of applicant _____

Signature of guardian _____

(If the applicant is under 18 years of age on the time of this application.)

Date

D	D	M	M	Y	Y	Y	Y
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Office stamp:

Send application to:

Admissions Department
Lyons College
Level 4, 303 Collins Street
Melbourne VIC 3000, Australia
T: +61 3 8648 6610 E: enquiries@lyons.edu.au