ABN: 82 138 825 224



**Student Details:** 

RTO No: 91746 CRICOS Provider: 03248G

Level 5&7, 140 Elizabeth Street Sydney NSW 2000

Ph: 02 9299 8766

Email: admin@sibn.nsw.edu.au Web: www.sibn.nsw.edu.au

## Statement of Intention (Student Under 18)

This form is for use by International students who are currently under the age of 18, and intend to arrive in Australia after their 18th birthday. This form must be completed and returned to SIBN Admin Team via email to: admin@sibn.nsw.edu.au with the necessary acceptance documentation.

SIBN Offer ID:						
Family Name/ Surname:						
First Name/ Given name:						
Date of Birth:						
Parent/ Guardian Details:						
Full Name:						
Relationship:						
Address:						
Contact Number:						
E-mail Address:						
Acknowledgment:  I hereby state that, although I am currently under the age of 18, I intend to arrive in Australia only after I have turned years of age.  I understand that if an electronic Confirmation of Enrolment (eCoE) and Confirmation of Appropriate Accommodation Welfare Arrangements (CAAW) form are issued, SIBN [03248G] will not be responsible for my welfare arrangements should arrive in Australia prior to my 18th birthday.  I understand that the eCoE and CAAW form will be cancelled and the Department of Education and Training (DET) at Department of Home Affairs notified if I arrive in Australia prior to my 18th birthday.						
				Upon my arrival in Sydney, Australia, I	will be living at the following address:	
				STREET ADDRESS		
SUBURB	POSTCODE					
Signed By Student:(Day/Month/Year)	Date:					
Signed by Parent/ Guardian: (Day/Month/Year)	Date:					
Admissions Office Use Only						
Approved/ Not Approved						
Signed:	Date:	(Day/Month/Year)				
Reasons (not approved):						
Guardianship Form	·					

Version 2.0

Last updated: Jan 2021 P a g e | 1

ABN: 82 138 825 224



RTO No: 91746 CRICOS Provider: 03248G Level 5&7, 140 Elizabeth Street Sydney NSW 2000

Ph: 02 9299 8766

Email: admin@sibn.nsw.edu.au

Web: www.sibn.nsw.edu.au

## **Guardianship Information**

## **Section 1: SIBN Guardianship**

Parent or legal custodian details:		
Name(s):	Address:	
Telephone No.:	Mobile No.:	
E-mail Address:	Relationship to student:	
Passport No.:	Nationality:	
Parent(s)/ Legal custodian signature:	Date:	
Student signature:	Date:	
Document checklist (Ensure the following documents are submitted with this form):  ☐ Certified copy of parent/legal custodian identification with photo and signature. (Example: passport, driver's license or official ID Card) if the identification is not in English, certified English translated copies must be provided as well.		

## Section 2: Living with parent, legal custodian or \*relative over 21

\* Relative is defined as parent or adoptive or step-parent, brother, sister, step-brother, step-sister, grandparent, step-grandparent, aunt, uncle, step-aunt, step-uncle, niece, nephew, step-niece or step-nephew. It does not include cousin.

Parent or legal custodian or relative aged over 21 details:		
Name(s):	Address in Australia:	
Telephone No.:	Mobile No.:	
E-mail Address:	Relationship to student:	
Parent(s)/ Legal custodian signature:	Date:	
Student signature:	Date:	

Privacy statement: The information on this form is collected for the purposes of assessing your accommodation and welfare arrangements. You have the right to access personal information that SIBN hold about you, subject to any exceptions in relevant legislation.