



The following form is to be completed by individuals wishing to study with Southern Cross Education Institute - Higher Education (SCEI-HE). All applicants must complete the following form and return to the Southern Cross Education Institute - Higher Education along with **Student Enrolment Agreement – International Students**.

A : APPLICANT'S DETAILS	
FIRST NAME :	LAST NAME :
ADDRESS :	
PHONE :	MOBILE :
E-MAIL :	
PROPOSED COURSE OF STUDY :	
DATE OF BIRTH :	PASSPORT NUMBER :
AGENT NAME AND BRANCH (IF APPLICABLE) :	

B. FUNDS REQUIRED

Financial capacity must demonstrate that the applicant has at least AUD72,465 (or at least AUD84,543 if there is a secondary applicant). demonstrated by the primary applicant's parent, spouse or de facto partner having a personal annual income, in the 12 months immediately before the application is made.

Please refer to <https://www.legislation.gov.au/F2019L01366/latest/texts> for additional information. Applicants are advised to visit <https://immi.homeaffairs.gov.au/> for the latest information.

EXPENSES	PER PERSON (COMPLETE AS APPROPRIATE)	FUNDS REQUIRED (AUD)	NUMBER OF FAMILY MEMBERS/CHILDREN	AMOUNT (AUD)
TRAVEL	APPLICANT	RETURN AIRFARE TO AUSTRALIA AUSTRALIA		
	FAMILY MEMBERS	ONE RETURN AIR FARE TO AUSTRALIA PER PERSON		
TUITION	APPLICANT	TOTAL COURSE FEES		
	CHILDREN AGE 5-18	\$ 9,661 PER YEAR		
LIVING	APPLICANT	\$ 24,505 PER YEAR		
	PARTNER	\$8,574 PER YEAR		
	FIRST CHILD	\$ 3,670 PER YEAR		
	EACH OTHER CHILD	\$ 3,670 PER YEAR		
OVERSEAS STUDENT HEALTH COVER	(VISA LENGTH COVER AS LISTED ON OFFER LETTER). FOR FAMILY MEMBERS PLEASE VISIT www.nib.com.au/overseas-students			
ANTICIPATED TOTAL EXPENSES				

C. FUNDING SOURCE						
FUNDING SOURCE EXAMPLE: PERSONAL/FAMILY SAVINGS, BANK LOAN, SPONSORSHIP	RELATIONSHIP TO APPLICANT (IF ANY)	BANK NAME (IF APPLICABLE)	ACCOUNT TYPE (IF APPLICABLE)	CURRENT BALANCE (LOCAL CURRENCY)	EXCHANGE RATE	AMOUNT (AUD)
TOTAL FUNDS AVAILABLE						

D. APPLICANT DECLARATION	E. WITNESS DECLARATION
I declare that I have a genuine intention to study the course for which I have applied, and that I have access to sufficient funds to cover tuition fees, living expenses, travel expenses, Overseas Student Health Cover for the duration of my studies and to support my dependants as declared in this application. I confirm that these funds are genuine and are to be used for no other purpose than to support me in my course of study. I acknowledge that any false or misleading statement may result in denial of my admission application or subsequent cancellation of my enrolment at SCEI-HE, which may affect the validity of my visa. APPLICANT'S NAME (PRINTED) : _____ APPLICANT'S SIGNATURE: _____ DATE : _____	I confirm that I have viewed a valid form of ID and that this "Applicant Financial Declaration Form" has been signed in my presence. NAME OF AUTHORISED WITNESS (PRINTED) : _____ SIGNATURE OF AUTHORISED WITNESS: _____ DATE : _____

F. AGENT DECLARATION (IF APPLICABLE)	
I confirm that I have verified the above mentioned applicant's financial documents and I am satisfied that this "Applicant Financial Declaration Form" contains the correct information. I am further satisfied that he/she possesses access to the funds detailed above and that these funds are genuine and to be used solely to pay for the intended course.	
AGENCY'S NAME (PRINTED) : _____ DATE : _____	AGENCY STAFF MEMBER'S NAME (PRINTED) : _____ AGENCY STAFF MEMBER'S SIGNATURE : _____

AUTHORISED WITNESSES INCLUDE:

- Authorised SCEI Representative
- Academic (Post- Secondary Institution)
- Accountant
- Architect
- Australian Consular Officer
- Australian Diplomatic Officer
- Bailiff
- Bank Manager
- Chartered Secretary
- Chemist
- Chiropractor
- Company Auditor or Liquidator
- Court Officer
- Defence Force Officer
- Dentist
- Doctor
- Electorate Officer (State – WA only)
- Engineer
- Industrial Organisation Secretary
- Insurance Broker
- Justice of the Peace
- Lawyer
- Local Government CEO
- Local Government Councillor
- Loss Adjuster
- Marriage Celebrant
- Member of Parliament
- Minister of Religion
- Nurse
- Optometrist
- Patent Attorney
- Physiotherapist
- Podiatrist
- Police Officer
- Post Office Manager
- Public Notary
- Public Servant
- Real Estate Agent
- Settlement Agent
- Sheriff or Deputy Sheriff
- Surveyor
- Teacher
- Tribunal Officer
- Veterinary Surgeon