

Excellence in theological education

APPLICATION for ADMISSION

Please complete this application form, include a passport photograph and the required attachments and send to:

> Perth Bible College 1 College Court Karrinyup WA 6018 Austrlaia

P: (08) 9243 2000 F: (08) 9243 2050

E: college@pbc.wa.edu.au

W: www.pbc.wa.edu.au



Perth Bible College

together with Australian College of Christian Studies

as a Member Institution of Sydney College of Divinity



Personal Details	Personal Details (continued)				
Title:	Are you of Aboriginal and / or Torres Strait Islander origin?				
Family Name:					
First Name: Preferred:	☐ No ☐ Yes, Aboriginal ☐ Yes, Torres Strait				
Second Name:	<u>—</u>				
Marital Status:	Country of Birth:				
Married* Single Other	If born overseas, year of arrival: Citizenship:				
*Previous Family name: Date of Birth:	Please provide original or certified copy of Birth Certificate or Passport.				
Gender: Female Male	If you are not an Australian citizen, are you a Permanent Australian Resident?				
Home phone: (h)	□ No □ Yes				
	If Yes, you must provide evidence of Residency.				
Work phone: (w)	If Yes, you must provide evidence of Residency.				
Work phone: (w)	Do you speak a language other than English at home:				
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Mobile:	Do you speak a language other than English at home:				
Mobile:(w)	Do you speak a language other than English at home: No Yes				
Mobile:	Do you speak a language other than English at home: No Yes If Yes, which language? Do you have a disability, impairment or long term medical condition which may affect your studies?				
Mobile:	Do you speak a language other than English at home: No Yes If Yes, which language? Do you have a disability, impairment or long term medical				
Mobile:	Do you speak a language other than English at home: No Yes If Yes, which language? Do you have a disability, impairment or long term medical condition which may affect your studies? No Yes If Yes, please indicate. Hearing Learning Mobility				
Mobile:	Do you speak a language other than English at home: No Yes If Yes, which language? Do you have a disability, impairment or long term medical condition which may affect your studies? No Yes If Yes, please indicate.				

Courses	If an Overseas student -					
Please indicate which course you are seeking admission into:	Country of Studies:					
Graduate Certificate of Arts	Language of Studies:					
Graduate Diploma of Arts	<u>Tertiary Level</u> (or other relevant studies) Please include copies of academic transcripts					
Master of Arts	Institution 1:					
Master of Divinity	Course Name:					
Master of Theology	Year award granted:					
	If incomplete, year withdrew:					
Have you previously been admitted into a Member Institution of the Sydney College of Divinity?	If incomplete, indicate proportion completed:					
No Yes	Institution 2:					
If Yes, where and when?	Course Name:					
When do you wish to begin study?	Year award granted:					
(eg Semester 2, 2011)	If incomplete, year withdrew:					
Course Admission	If incomplete, indicate proportion completed:					
On what basis are you seeking admission?	Institution 3:					
Higher School Certificate or equivalent*copy of transcript	Course Name:					
Secondary Education*, TAFE or equivalent*copy of transcrip	t Year award granted:					
Higher Education course* (eg. Degree)*copy of transcript	If incomplete, year withdrew:					
Professional Qualification* evidence required	If incomplete, indicate proportion completed:					
Mature age * copy of passport or birth certificate						
Special entry * evidence required	Are you currently studying elsewhere? No Yes					
Are you intending to study:						
Part-time Full-time	If Yes, complete the following:					
Previous Education	Institution: Course Name:					
Secondary Level Please include copy of academic record or award	Part-time Full-time					
School attended:	English Proficiency					
State: Postcode:	Is English your first language? No Yes					
Year 12 completed: No Yes	(If English is not your first language, you may be required to complete an IELTS test)					
Year that you left school:	If you have completed an English test-					
ATAR (or equiv.) Score :	Name of English Language Test Completed:					
Name of the town/suburb where you lived in your last year of secondary school:	Test Date: Test Score:					
Town/Suburb Postcode:	Please include a copy of the Test Results.					
	- -					

Credit for Previous Study	Next of Kin				
Would you like to apply for credit for previous study?	Name of Next of Kin:				
☐Yes ☐ No	Address of Next of Kin:				
If Yes, please include transcript of previous study					
Financial Information	Postcode:				
	Country:				
Tuition fees are required before each semester / trimester begins	Phone:				
How do you plan to pay for your study?	Marketing Information				
Cash/Cheque	Marketing Information				
☐ Credit Card - ☐ Mastercard ☐ Visa	Why have you chosen to study with this College?				
Bank Transfer					
Fee Help – A loan provided by the Government. This can be for all or part of your fees.					
Other:	How did you discover this College?				
Have you used HECS/FEE_HELP before? No Yes					
If yes provide your CHESSN number:					
Are you a Pensioner? No Yes	☐ Web ☐ student ☐ Staff				
If Yes, please supply evidence for administration purposes	Exhibition etc. Church Advertising				
Church Information					
21. Church attending:	Accommodation				
Church Address:	Will you be seeking to use our residential accommodation?				
Period of Attendance:	□ No □ Yes				
Church Involvement:	(If Yes, complete Accommodation application form)				
Reference Information (3 required)					
1: Name of Pastor/Leader:	Application Checklist				
Address of Pastor/Leader:	Birth Certificate or Passport				
	3 Passport size photographs				
Postcode:	Evidence of residency (if required)				
Name of Church:	Academic Transcripts – secondary and / or tertiary				
Phone:	Fee Help Application (if applying for Fee Help)				
Email:					
Name, Address, Email, of Referees 2&3:	Testimony				
2:	References (Pastor/Church Leader and 2 others)				
3:	IELTS (If required)				
	Other:				

Withdrawal and Refund

Students may withdraw from courses without <u>academic penalty</u> only if notice of withdrawal is submitted in writing to the Registrar by 4.00 pm on the Census Date applicable to the subject in question. If withdrawal occurs up to 4.00 pm on the Census date the tuition fee will be refunded but a withdrawal penalty will be charged to the student and is payable immediately. Beyond this time, tuition fees will not be refunded. See the Perth Bible College Refund Policy for further details.

I understand and accept the Withdrawal and Refund arrangements of Perth Bible College.

Signature:				_ Date	:/		. /	
Privacy Legislation								
Perth Bible College requires the and to cater for particular studer such services and to assess your	ıt's need	ls. If you do not provid						
Please also note that Perth Bible (eg educational institutions suc as DEEWR, Centrelink and the I Fund Manager) in order to provid	h as uni Departm	versities, colleges and a nent of Immigration ar	accreditatic nd Citizensl	n bodies nip, Tuitio	and Australia on Assurance	n governm Scheme, I	ent bodies such ESOS Assurance	
You can request access to your h I understand and accept the priva			n by contact	ting the P	rivacy Officer.			
Signature:				_ Date	:/		/	
Declaration								
student code of conduct at all ti that the information that I have p Signature:	rovided	herein is true and accu	urate to the	best of m				
OFFICE USE ONLY								
Date App. Rec'd: Incomplete:	 ¬	Request for Info:	++ 0 =	Referenc Date:	es Rec'd:	OK to Pro	ocess: Y/N	
Complete: [Approved Course:		Acknowledgement Le		Date.				
Basis for Admission:								
Dean of Students / Faculty Advis	sor:		Principal /	Academic	: Dean:			
, and the second		Sign.:						
Credit Application: Y / N								
Credit Offered:	E	FTSL	U:	sed:		EFTSL		
Date:	Sigr	າ.:		_		- 		
HEIMS Credit Basis: HE / VET .	/ HE & \	/ET / OUTSIDE AUS /	WORK EXF	/ OTHE	R			
VET:			HEP:					
Field of Study:			Name of Ir	nst.				
Level of Award:								
Provider Type:								
Formal Acceptance Letter	formal Acceptance Letter Fee-Help Form:			N/A Edu Point Entry:				
Sent: Y / N	Date Re			Dat			_	
Entered into Paradigm:	nto Paradigm: Level of Education: Dip / Adv Dip / Degree / Grad Dip							
PBC Student No: Edu Point No:					Chessn No:			