



QUESTIONNAIRE (FOR FEE PAYING STUDENTS)

In order to comply with Commonwealth reporting requirements, Raffles College of Design and Commerce must collect the following information from all students. It will not be used by the Commonwealth to identify individual students and is used for statistical and policy development purposes. Please provide all of the following information to ensure the College records are up-to-date.

STUDENT NAME

Title: _____ Family Name: _____ Given Name(s): _____

PREVIOUS NAME (IF APPLICABLE)

Title: _____ Family Name: _____ Given Name(s): _____

ADDRESS

Street: _____

Suburb: _____ State: _____ P/code: _____

1. **GENDER:** Male Female

2. **DATE OF BIRTH:** (yyyy/mm/dd) _____/_____/_____

3. **ARE YOU ABORIGINAL OR TORRES STRAIT ISLANDER?**

Neither Aboriginal Torres Strait Islander Both, Aboriginal and TI

4. **WERE YOU BORN IN AUSTRALIA?** Yes - Go to Question 5

No - What country were you born in? _____

In what year did you arrive in Australia? _____ (yyyy) or Are you living overseas?

5. **WHAT IS THE LANGUAGE SPOKEN AT HOME AT YOUR PERMANENT HOME ADDRESS?**
(If you are a temporary resident this is the language that is spoken in your country of origin.)

English Language other than English - Please name: _____

6. **BASIS FOR ADMISSION:** What is the basis for your admission to this course?

Completed higher education course Completed year 12 Employment experience

Mature age special entry provision Professional qualification Other

7. **HAVE YOU COMPLETED A HIGHER EDUCATION POSTGRADUATE COURSE?**

No Yes - Year last enrolled _____ yyyy

8. **HAVE YOU COMPLETED A HIGHER EDUCATION BACHELOR LEVEL COURSE?**

No Yes - Year last enrolled _____ yyyy

9. **HAVE YOU COMPLETED A HIGHER EDUCATION SUB-DEGREE COURSE?**

No Yes - Year last enrolled _____ yyyy

10. HAVE YOU COMMENCED BUT NOT COMPLETED A HIGHER EDUCATION COURSE?

No Yes - Year last enrolled _____ yyyy

11. HAVE YOU COMPLETED A TAFE COURSE?

No Yes - Year last enrolled _____ yyyy

12. HAVE YOU COMPLETED ANY OTHER QUALIFICATION OR CERTIFICATE OF ATTAINMENT OR COMPETENCE?

No Yes - Year last enrolled _____ yyyy

13. HAVE YOU BEEN GRANTED CREDIT FOR PRIOR STUDY TOWARDS YOUR COURSE AT RAFFLES COLLEGE?

No Yes - At what institution were those prior studies undertaken? _____

14. DID YOU COMPLETE YEAR 12 IN AUSTRALIA?

No Yes - What was your tertiary entrance score (eg OP/TER/UAI)? _____

Year completed: _____ What is your home postcode? _____

School name: _____ State: _____

15. HAVE YOU PREVIOUSLY ENROLLED IN ANOTHER HIGHER EDUCATION PROVIDER?

Higher Education Providers include universities and some TAFEs and CAEs.

No Yes - At which institution were/are you enrolled? _____

- What was/is your Student number? _____

- Please provide your CHESSN (if known) _____

16. DO YOU HAVE A DISABILITY, IMPAIRMENT OR LONG TERM MEDICAL CONDITION WHICH MAY AFFECT YOUR STUDIES?

No Yes - Please indicate the areas of impairment:

Hearing Vision Learning

Medical Mobility Other

Would you like advice on support services, equipment and facilities which may assist you?

Yes No

17. ARE YOU IN RECEIPT OF A COMMONWEALTH SCHOLARSHIP?

No Yes - Please name the scholarship _____

18. HAVE YOU PREVIOUSLY ENROLLED AT RAFFLES COLLEGE?

No Yes - in which year and semester were you last enrolled? _____ (yyyy/ss)

What was your student number? _____

DECLARATION

I declare that the information on this form is, to the best of my knowledge, correct and complete in every detail.

I authorise Raffles College of Design and Commerce to store information with respect to my application and to obtain or verify any other details about my academic record or history from any school, higher education institution or educational authority to enable my application to be assessed.

I understand that Raffles College of Design and Commerce is collecting the information on this form for statistical data collection purposes. Some information on this form is collected under the "AVETMISS Data Specifications" as requested by the Australian Government.

I also understand that Raffles College of Design and Commerce will use the information on this form for the purpose of assessing my entitlements to Commonwealth Assistance under the Higher Education Support Act 2003 and allocation of a Commonwealth Higher Education Student Support Number (CHESSN) and that Raffles College of Design and Commerce will disclose this information to the Commonwealth Department of Education, Employment and Workplace Relations (DEEWR) for those purposes.

I accept that DEEWR will store the information securely in the Higher Education Information Management System. DEEWR may disclose this information to the Australian Taxation Office. Raffles College of Design and Commerce and DEEWR will not otherwise disclose the information without my consent unless required or authorised by law.

Full Name: (Please print) _____

Signature of Applicant: _____ Date: _____
