



## FEE-HELP APPLICANT QUESTIONNAIRE

In order to comply with Commonwealth reporting requirements, Raffles College of Design and Commerce must collect the following information from 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: \_\_\_\_\_

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- GENDER:** Male  Female
  - DATE OF BIRTH:** (yyyy/mm/dd) \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_
  - ARE YOU ABORIGINAL OR TORRES STRAIT ISLANDER?**  
 Neither  Aboriginal  Torres Strait Islander  Both, Aboriginal and TI
  - 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?
  - 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: \_\_\_\_\_
  - 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
  - HAVE YOU COMPLETED A HIGHER EDUCATION POSTGRADUATE COURSE?**  
 No  Yes - Year last enrolled \_\_\_\_\_ yyyy
  - HAVE YOU COMPLETED A HIGHER EDUCATION BACHELOR LEVEL COURSE?**  
 No  Yes - Year last enrolled \_\_\_\_\_ yyyy
  - 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?**

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?**

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

What was your student number? \_\_\_\_\_

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**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: \_\_\_\_\_

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