

# APPLICATION FOR ADMISSION

APTC is supported  
 by the Australian  
 Government



**Complete this form in English with a blue or black pen**

When you see this paperclip it means  
**YOU MUST PROVIDE DOCUMENTS AS EVIDENCE**  
 See Q. 20 for a checklist of acceptable documentation

**There is no cost to the applicant to submit an application, or for this Application for Admission form**

**Q1 What course are you applying for?**

**Q2 Your current legal name - as shown on proof of Identity or proof of name change (see page 3)**

Mr  Mrs  Miss  Ms  Other

First Name

Second Name

FAMILY NAME (in CAPITAL LETTERS)

**Q3 Name you are known as**

**Q4 Your Date of Birth**  
 If you are under 18 you cannot apply.

Date  Month  Year

**Q5 Your Gender**  
 Male  Female

**Q6 Which country are you a citizen of?**  
 Please tick one of the options below.

Cook Islands  Papua New Guinea   
 Fiji  Palau   
 Kiribati  Solomon Islands   
 Marshall Islands  Tonga   
 Micronesia  Tuvalu   
 Nauru  Vanuatu   
 Niue  Samoa   
 Other Country

**Q7 Your Contact Details**  
 Home phone number  (+ )  
 Mobile phone number  (+ )  
 Work phone number  (+ )  
 Email address   
 Facebook Name   
 What is the best way to contact you?  
 Home Ph  Mobile Ph  Work Ph  Email

**Q8 Where do you live?**  
 Street number and name   
 Suburb / Town   
 Province / Island   
 Country

**Q9 Your Postal Address**  
 Same as above  go to next question  
 OR enter details  
 PO Box Number OR Street number and name   
 Suburb / Town   
 Province / Island   
 Country

**Q10 Emergency Contact**  
 Full Name (first name, LAST NAME)   
 Relationship to you (e.g. Father, Wife, Uncle)   
 Home phone number  (+ )  
 Mobile phone number  (+ )  
 Email address

**Q11 What is your current employment status?**  
 Employed  Self-employed   
 Unpaid work  Unemployed

**Q12 Your Current Employer**  
 Name of Company / Organisation / Business   
 Employer's Email Address   
 PO Box Number OR Street number and name   
 Suburb / Town   
 Province / Island   
 Country

**Q13 Do you have a current, valid passport?**

- Yes  you must provide a copy of the photo ID page
- No  you must provide other Proof of Identity (see Q20 table)

Passport Number

Expiry Date

**Q14 APTC supports people with disabilities or special needs. Do you require assistance with a disability or have any special needs?**

- No  Yes  Please specify below

*We may contact you for further information*

**Q15 Do you have Work Experience or Education related to a course you are applying for?**

- No  Yes

**Q16 What WORK EXPERIENCE do you have over the last 10 years relevant to the course you are applying for?**

Position/Tasks	Name of Company / Organisation / Business	From		To		Type			
		Month	Year	Month	Year	Full time	Part time	Un-paid	Volunteer
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*If you need more space please attach another page.*

**Q17 What EDUCATION do you have relevant to the course you are applying for?**

Course/Qualification	Name of High School, Tertiary Institution or University	Year completed

*If you need more space please attach another page.*

**Q18 How will you be funding your course?**

- Employer fully funded
- Self or privately funded  
This means you will be paying the course fees yourself, or someone will be paying them for you.
- Seeking a scholarship  
**Limited scholarship assistance is available.** There is no guarantee that you would be granted scholarship support.

**Q19 Have you previously been awarded any scholarship?**

- No  Yes – APTC  Yes – Other

**Q20 REQUIRED DOCUMENTS - Attach COPIES**

If you do not supply all of the required documents your application cannot be considered

- Passport sized photo** - write your name on the back of the photo and attach it to the front page
- Q2 Proof of Identity - Certified Copies**
- Q4** (Passport photo ID page and/or Birth Certificate and/or Statutory Declaration and/or Certificate of Identity and/or
- Q6** Driver's Licence with photo ID only until replaced by passport)
- Q2 Proof of name change** - only required if your current name is different from your Proof of Identity
- Q16 Work references** - current and/or previous employers
- Q16 Work History** - Resume / CV / description of tasks
- Q17 Qualifications / Education results** - Certificates, Statements of Attainment, Diplomas, etc

*Tick only if documents are attached*

## APPLICANT DECLARATION

- I declare that the information supplied in this application and the supporting documentation is true and complete.
- I will advise APTC of any changes to my contact details.
- I have read and understood the privacy statement below.

Signature

Date

## HOW DID YOU FIND OUT ABOUT APTC COURSES?

Please tick all that are applicable

- |           |                          |                            |                          |
|-----------|--------------------------|----------------------------|--------------------------|
| Friend    | <input type="checkbox"/> | School                     | <input type="checkbox"/> |
| Relative  | <input type="checkbox"/> | Local Tertiary Institution | <input type="checkbox"/> |
| Employer  | <input type="checkbox"/> | Website                    | <input type="checkbox"/> |
| Newspaper | <input type="checkbox"/> | Church                     | <input type="checkbox"/> |
| Radio     | <input type="checkbox"/> | Community Group            | <input type="checkbox"/> |
|           |                          | APTC Presentation          | <input type="checkbox"/> |
| Other     | <input type="checkbox"/> | <input type="text"/>       |                          |

## NEXT STEPS

- 1 Submit your application to an APTC office, see back page for details.
- 2 You will be contacted by an APTC representative to undertake the following assessments.
  - Complete the Literacy and Numeracy assessment.
  - Undergo a Skills Assessment specific to the course you are applying for

## Privacy Statement

The APTC is required to comply with Australian federal and state privacy requirements. The information you have provided to the APTC will be used, where applicable, for the purpose of assessing your application, assessing your welfare needs (if any), processing and advising you of your assessment results and other communications with you as required. A condition of your application is that you consent to the release of your results to your employer, sponsoring organisations or government agencies where appropriate.

You can request access to your personal information by writing to the APTC office at the contact address detailed on the back page of this form. If you do not wish to provide the requested information, this may restrict the range of services and educational programs that APTC can offer you. Personal information will only be used for the purpose for which it was collected.

## EMPLOYER SUPPORT SECTION

Only an authorised person from your place of employment should complete this section.

- E1** Studying in an APTC course requires absence from the workplace for extended periods of time. Refer to course brochure for specific details.

Do you support your employee applying to study with the APTC?

Yes  No

Signature

Date

- E2** Will you support this person financially to attend training?  
Please tick a response for each of the options below.

	Yes	No
Course Fees (full)	<input type="checkbox"/>	<input type="checkbox"/>
Course Fees (partial)	<input type="checkbox"/>	<input type="checkbox"/>
Flights	<input type="checkbox"/>	<input type="checkbox"/>
Accommodation	<input type="checkbox"/>	<input type="checkbox"/>
Allowances	<input type="checkbox"/>	<input type="checkbox"/>
Travel transfers (buses)	<input type="checkbox"/>	<input type="checkbox"/>
Salary	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>

- E3** Contact Details

Name

Position

Work phone number  (+ )

Mobile phone number  (+ )

Fax number  (+ )

Email address

Are your Company / Organisation / Business details entered correctly on the front page (Q12 Current Employer)?

Yes  No  Please correct them, thank you.



**Please return the completed application form and all attachments to one of our offices:**

**APTC Vanuatu**

Vanuatu Institute of Technology, Leopold Sedar Senghor Boulevard, Port Villa  
PO Box 3390, Port Villa, Vanuatu  
Phone: (678) 24066  
Fax: (678) 23985  
Email: [enquiries.vanuatu@aptc.edu.au](mailto:enquiries.vanuatu@aptc.edu.au)

**APTC Papua New Guinea**

POMTECH, Idubada, Port Moresby  
PO Box 1043, Port Moresby, NCD, Papua New Guinea  
Phone: (675) 7756 9688  
Fax: (675) 321 3662  
Email: [enquiries.png@aptc.edu.au](mailto:enquiries.png@aptc.edu.au)

**APTC Samoa**

Building N, National University of Samoa, Vaivase Road Apia  
PO Box 2474, Apia, Samoa  
Phone: (685) 26 844  
Fax: (685) 26 871  
Email: [enquiries.samoa@aptc.edu.au](mailto:enquiries.samoa@aptc.edu.au)

**APTC Solomon Islands**

Lot 1664 Town Ground, West Honiara  
PO Box 2374, Honiara, Solomon Islands  
Phone: (677) 21313  
Mobile (677) 749 6084  
Email: [enquiries.solomons@aptc.edu.au](mailto:enquiries.solomons@aptc.edu.au)

**APTC Fiji - Suva and Regional Head Office**

Level 5 Ganilau House, Corner Edward and Scott Street, Suva  
PO Box 14319, Suva, Fiji Islands  
Phone: (679) 330 0967

**APTC Email:** [enquiries@aptc.edu.au](mailto:enquiries@aptc.edu.au)

**APTC Website:** [www.aptc.edu.au](http://www.aptc.edu.au)

**APTC USE ONLY**

**Recipient of Application**

If this section is not completed the form will be returned to the receiving campus for completion without entry to CRM

Date received

Your Full Name   
(print clearly)

Are all the required attachments supplied? Q20 Yes  No

Is the LLN attached? Yes  No

Is the Skills Assessment attached? Yes  No

Relative to the campus is the applicant:

Local

Rural

Remote

Does the applicant meet APTC requirements?

Q4 Over 18? Yes  No

Q6 PIFC ticked? Yes  No

Q14 Related Work Exp. or Education Yes  No

Is the applicant applying for scholarship, Q18? Yes  No

Status assigned - tick ONE

- Application Incomplete - need more info from applicant
- Application Complete - tests to be done
- Not Eligible
- LLN Test completed
- Vocational Skills Test completed

**Notes**

Student receipt number: .....



**AUSTRALIA-PACIFIC  
TECHNICAL COLLEGE**  
CREATING SKILLS FOR LIFE