Application for Admission 2015
- Higher Education -

General enquiries:
☎️ (08) 9233 1821
Email: he@wcit.wa.edu.au

35 Kendrew Crescent
Joondalup WA 6027
TEQSA ID: PRV13004

The information in this form is for statistical purposes and government reports. Disclosing this information will not affect the outcome of the application, which is subject to course availability and entry requirements. Privacy information is provided at the end of this document.

Title (Mr, Ms, etc.)

Gender (M/F)

Date of Birth (dd/mm/year)

Surname / Family name

Given name(s)

Previous Family name (if applicable)

Address (contact/postal address for all communications as a student at West Coast Institute)

Number and Street

Suburb / Town

State

Postcode

Mobile Phone

Home Phone

Email

Residency status (proof of status is required; e.g., certified copy of birth/citizenship certificate or passport)

Australian Citizen ☐

Permanent Resident ☐

Other (please specify)

Have you ever been enrolled at West Coast Institute?

YES ☐

NO ☐

(West Coast Institute of Training; West Coast College of TAFE)

If YES, please provide your student number:

I.D. NUMBER [________________________]
1. Address: Is your permanent address the same as the address provided on the Application for Admission?

YES □     NO □ [If no, please complete the permanent home address below]

Number and Street

Suburb / Town State
Postcode

2. Country of birth: Were you born in Australia?

YES □     NO □ [If no, please complete the details below]

Country of birth

What was your first year of arrival in Australia?

What is your country of citizenship?

3. Language: Do you mainly speak English at home?

YES □     NO □ [If no, please complete the details below]

What is the main language you speak at home?

4. Are you of Aboriginal or Torres Strait Island descent?

YES □ [If yes, please specify below]     NO □

□ Aboriginal    □ Torres Strait Island    □ Both Aboriginal and Torres Strait Island descent

5. Which of the following best describes your current employment status?

□ Full-time work†     □ Unemployed; seeking full-time work

□ Part-time work†     □ Unemployed; not seeking full-time work

† What is the industry or professional area of your main employment?

6. Do you have a disability, impairment or long-term medical condition which may affect your studies?

YES □ [If yes, please specify below]     NO □

□ Hearing/Deaf    □ Physical/Mobility    □ Intellectual    □ Mental illness    □ Learning    □ Vision

□ Acquired brain impairment    □ Medical condition    □ Other

________________________________________

Will you require special assistance as a student?     YES □     NO □
7. Educational level of your Parents/Guardians:

<table>
<thead>
<tr>
<th>Do you know the educational level of your Parents/Guardians</th>
<th>Parent/Guardian 1</th>
<th>Parent/Guardian 2</th>
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</thead>
<tbody>
<tr>
<td>Yes ☐ No ☐</td>
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<thead>
<tr>
<th>Gender of your Parents/Guardians 1 &amp; 2 (M/F)</th>
<th>Parent/Guardian 1</th>
<th>Parent/Guardian 2</th>
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Please indicate the highest level of education completed by your Parents/Guardians

<table>
<thead>
<tr>
<th>Postgraduate qualification (e.g., Masters Degree, PhD)</th>
<th>Parent/Guardian 1</th>
<th>Parent/Guardian 2</th>
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<tr>
<th>Bachelor Degree</th>
<th>Parent/Guardian 1</th>
<th>Parent/Guardian 2</th>
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<tr>
<th>Other Post-Secondary qualification (e.g., TAFE/VET course)</th>
<th>Parent/Guardian 1</th>
<th>Parent/Guardian 2</th>
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<tr>
<th>Year 12 or equivalent</th>
<th>Parent/Guardian 1</th>
<th>Parent/Guardian 2</th>
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<tr>
<th>Year 10 or equivalent</th>
<th>Parent/Guardian 1</th>
<th>Parent/Guardian 2</th>
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<tr>
<th>Did not complete Year 10 schooling</th>
<th>Parent/Guardian 1</th>
<th>Parent/Guardian 2</th>
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ACADEMIC HISTORY

Secondary Level Education (certified copy of the Statement of Results is required)

<table>
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<tr>
<th>Name of School</th>
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Suburb/Town, Postcode and State/Country

Last year at school (e.g., 2013)  Student ID Number

Level of Secondary Education completed (e.g., Year 12)  Tertiary Rank (e.g., ATAR)

Post-Secondary Level Education (VET/TAFE qualification and/or University qualification; complete or incomplete; certified copy of the Statement of Results is required)

Course of Study (in full)

Name of Institution

Suburb/Town, Postcode and State/Country

Last year of study (e.g., 2013)  Student ID Number

Level of completion (e.g., Completed; Proportion of units)

Course of Study (in full)

Name of Institution
### Course Information

**Associate Degree in Education (Early Childhood)**

<table>
<thead>
<tr>
<th>WCI Course Code</th>
<th>TEQSA Code</th>
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<tr>
<td>ADEC10</td>
<td>CRS1300175</td>
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**Year of Commencement**

- **2015**

**Semester (1 or 2)**

- **Semester 1**

**Attendance Type** (Full-time or Part-time)

<table>
<thead>
<tr>
<th>Institution</th>
<th>Course/Degree</th>
<th>Years</th>
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<td>A:</td>
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<td>B:</td>
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<td>C:</td>
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### Advanced Standing Request (complete if you would like to be assessed for credit)

**Name of unit from previous course of study & Institution**

**Name & Code of West Coast Institute unit for Advanced Standing request**

1. **Name of unit from previous course of study & Institution**

**Name & Code of West Coast Institute unit for Advanced Standing request**
2. 
**Name of unit from previous course of study & Institution**

**Name & Code of West Coast Institute unit for Advanced Standing request**

3. 

### Details of working experience relevant to application

<table>
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<tr>
<th>Employer/Institution</th>
<th>Experience</th>
<th>Year(s)</th>
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<tr>
<td>A:</td>
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<td>B:</td>
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<td>C:</td>
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### RPL Request (complete if you would like to be assessed for credit)  
*Office Use Only*

**Previous experience to be assessed for RPL**

**Name & Code of West Coast Institute unit for RPL request**

1. 
**Previous experience to be assessed for RPL**

**Name & Code of West Coast Institute unit for RPL request**

2. 
**Previous experience to be assessed for RPL**

**Name & Code of West Coast Institute unit for RPL request**

3. 
IMPORTANT INFORMATION

**Advanced Standing:** Applications for Advanced Standing or other credit for prior learning must be submitted directly to the Course Co-ordinator by **19th December 2014**.

**Closing Date:** Semester 1 applications close **Friday 19th December 2014** (unless otherwise arranged with the Manager Higher Education [he@wcit.wa.edu.au](mailto:he@wcit.wa.edu.au)). Late applications will be considered.

**Literacy and Numeracy:** All students will be required to participate in a six week unit, *Literacy and Numeracy for Teachers*, for evaluation of English language and numeracy proficiency and instruction on scholarly student presentations. The unit is free of charge and is compulsory to progress in the course (unless approved for advanced standing). Students who require English language and/or numeracy support will be referred to specialist staff for further tuition at no cost.

**Special Consideration (Equity):** Applicants who require consideration of special circumstances must contact the Course Co-ordinator. Requests will be considered by the Course Co-ordinator and Director of Higher Education.

**Documentary evidence:** Certified copies of relevant original documents must be submitted with this application. Evidence for Advanced Standing or RPL should be not more than seven (7) years old, unless approved by the Course Co-ordinator and the Manager Higher Education.

Documents in a language other than English must be accompanied by a certified English translation from a recognised translation service.

**Privacy:** The information provided by the applicant is collected for the purposes of processing the application and complying with regulatory requirements. The information will be held by WCI and may be accessed and used by people employed or engaged by WCI for authorised purposes. The information may be used or disclosed to others where required or authorised by law. The provision of information by the applicant is voluntary, but if the information is not provided WCI may be unable to process the application or provide services. The applicant has a right of access to their own personal information, subject to any exceptions in relevant legislation, and are responsible for advising WCI of changes to personal information.

**Supporting Documentation:** It is the applicant’s responsibility to confirm the entry requirements and provide all essential information. Incomplete applications will be rejected. Certified copies of original documents must be provided. The application form and attached documents will be retained by West Coast Institute.

Note: People who may certify documents include (but are not limited to): WCI Academic staff, WCI Public Service Officers (Level 3 or above), Accountant (CPA), Bank Manager or senior officer, Defence Force Officer, Dentist, Doctor, Engineer, Justice of the Peace, Lawyer, Local Government senior officer, Law Court Officer, Minister of Religion, Nurse, Optometrist, Physiotherapist, Police Officer, Psychologist, Real Estate or Settlement Agent, Teacher, Union Official, Veterinary surgeon.

An interview may be required to consider the application, or clarify any details in the application. If an interview is required, the Course Co-ordinator will contact the applicant.
Applicant Declaration

☐ I declare the information I have provided in this application form is complete and correct.

☐ I acknowledge that WCI may vary or reverse any decision regarding admission made on the basis of incorrect, incomplete or fraudulent information.

☐ I understand the information collected for this application is to enable WCI to assess my application, create a student record and meet regulatory reporting requirements. The information may be accessed and used by people employed or engaged by WCI for authorised purposes. The information may be used or disclosed to others where required or authorised by law (e.g., State and Australian Government agencies).

☐ I understand the information is to enable WCI to meet statistical and regulatory reporting requirements. The information may be accessed and used by people employed or engaged by WCI for authorised purposes. The information may be used or disclosed to others where required or authorised by law.

☐ I authorise WCI to obtain further academic information or official student records from any educational institution or other recognised institution if necessary to verify or consider my application.

☐ I agree to pay tuition fees by the due date provided on the Academic Calendar, otherwise enrolment may be terminated by West Coast Institute.

Check-list for Submission of Application

☐ 1* Certified copy of Secondary Education results (Statement of Results, or equivalent, including ATAR).

☐ 2* Certified copy of Post-Secondary Education results (Statement of Results, or equivalent).

☐ 3. Curriculum vitae if employment history is relevant for the course of study or for credit for prior learning.

☐ 4. WCI Higher Education Statistical Information Sheet.

*DO NOT SUBMIT ORIGINAL DOCUMENTS 1 & 2. The application form and attached documents will be retained by WCI.

Completed applications should be submitted to:

The Manager Higher Education
West Coast Institute
Locked Bag 7
Joondalup WA 6919

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