# APPLICATION FORM INTERNATIONAL STUDENTS



For application to any of the Acting courses please attach a passport size head shot. Please also print clearly in block letters using a ballpoint pen and complete all sections of this form. CRICOS Provider No. 02660C. RTO Code 91143

### **1. Personal Details**

Last Name	First N	ame		DOB	/ /	
Title Miss Ms Mrs [	Mr					
Are you an Australian citizen or perm	anent resident?	Yes 🗌 No				
Address						
Suburb/City	State		Country		Postcode	
Phone (Home)	Mobile					
Email		Agent (if applicable)				
How did you first hear about AFTT?						
2. Course Details		Specialisation			Intake	
CUA51015 Diploma of Screen & Media		Acting		February 2019		
CUA60615 Advanced Diploma of Screen & Media		🗌 Film		July	2019	
		Live Production		E Feb	ruary 2020	
				July	2020	
3. Education						
Are you currently in High School?	Yes No	If Yes, current y	ear at school			
Highest level of study attained	Year 10 Year	ar 11 🗌 Year 12				
	Certificate II to V*	Diploma*	Degree*	Other*		
*Name of qualification:						

#### 4. Relevant Experience

Please list any relevant experience, skills or training you have had which relates to this course e.g. past performances, any media you have created, type of roles played, production experience.

## 5. English Language Proficiency

I have completed formal study in English	I plan to take an IELTS/TOEFL/PTE test (please circle relevant test)
I have taken IELTS / TOEFL / PTE (pl	ease circle relevant test, and attach certified copies of test results)
I would like an ELICOS pathway	Please advise me on how to meet the language requirement

#### 6. Declaration

I declare that the information on this form is, to the best of my knowledge, true in every respect.

Student's Signature:

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