

# APPLICATION FORM

Before you complete this form, please refer to our website and/or consult our local agent/representative.

## EDUCATION AGENT DETAILS

Do you have an education agent?  Yes  No

Agency Name:	
Consultant's Name:	
Consultant's Email:	
Consultant's Mobile:	

## PERSONAL DETAILS

Family Name:
Given Name(s):
Gender:
Date of Birth:
Country of Nationality:
Country of Birth:
Passport Number:
Visa Expiry Date (if applicable):
What visa will you be holding when you commence studies? <input type="checkbox"/> Student <input type="checkbox"/> Working <input type="checkbox"/> Other (please specify): <input type="checkbox"/> Bridging (if so, which one?):
Are you currently in Australia? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you of Aboriginal or Torres Islander Origin? <input type="checkbox"/> Yes <input type="checkbox"/> No
Mobile Number:
Telephone Number:
Email Address:



## ADDRESS OF YOUR USUAL RESIDENCE IN YOUR HOME COUNTRY

Flat/Unit Number:	Street/Lot Number:
Street Name:	Suburb/Locality/Town:
State/Territory:	
Country:	
Postcode:	

## POSTAL ADDRESS (if different from the above)

Flat/Unit:	Street/Lot Number:
Street Name:	Suburb/Locality/Town:
State/Territory:	
Country:	
Postcode:	

## ADDRESS OR INTENDED ADDRESS IN AUSTRALIA (if known)

Flat/Unit:	Street/Lot Number:
Street Name:	City/Suburb:
State/Territory:	
Country:	
Postcode:	



## EMERGENCY CONTACT DETAILS

Family Name:	Given Name:
Mobile Number:	Telephone Number:
Relationship:	

## FAMILY MEMBER CONTACT DETAILS IN HOME COUNTRY

Family Name:	Given Name:
Mobile Number:	Telephone Number:
Relationship:	

## HEALTH COVER

Overseas Student Health Cover (OSHC) must be arranged for the duration of your visa as a condition of your student visa. BPP Institute can arrange health cover with Allianz Global Assistance (our preferred provider) on your behalf for the duration of your visa. If you pay the full OSHC amount up-front, you are protected against any increases in the OSHC fees for the duration of your visa. If you complete your studies earlier than expected, you may be entitled to a refund from Allianz Global Assistance. Health insurance is your responsibility, and current cover must be maintained by students for the duration of their stay in Australia.

Do you want BPP Institute to arrange OSHC for the duration of your visa in Australia?

Yes  No

If yes, please select one of the coverage types:  **Single**  **Dual**  **Family**

If no, the reason for not commencing a new Allianz Global Assistance Membership.

You already have a current OSHC membership for the overall duration of your visa

Provider:
Membership Number:
Expiry Date:



## COURSES

Undergraduate	Intake Dates
<input type="checkbox"/> Bachelor of Business (Accounting) CRICOS Course Code 072490C	<input type="checkbox"/> 02 June 2025
<input type="checkbox"/> Bachelor of Business (Management) CRICOS Course Code 072493M	<input type="checkbox"/> 18 August 2025
<input type="checkbox"/> Bachelor of Business (Marketing) CRICOS Course Code 072491B	<input type="checkbox"/> 27 October 2025
<input type="checkbox"/> Non-Award Study	<input type="checkbox"/> 23 March 2026
	<input type="checkbox"/> 01 June 2026
	<input type="checkbox"/> 17 August 2026
	<input type="checkbox"/> 26 October 2026
Postgraduate	Intake Dates
<input type="checkbox"/> Graduate Certificate of Business CRICOS Course Code 105841H	
<input type="checkbox"/> Graduate Diploma of Business CRICOS Course Code 105840J	
<input type="checkbox"/> Graduate Diploma of Information Systems CRICOS Course Code 110248E	<input type="checkbox"/> 21 July 2025
<input type="checkbox"/> Master of Business CRICOS Course Code 105839B	<input type="checkbox"/> 08 September 2025
<input type="checkbox"/> Master of Business Administration CRICOS Course Code 105838C	<input type="checkbox"/> 17 November 2025
<input type="checkbox"/> Master of Management Information Systems CRICOS Course Code 110247F	<input type="checkbox"/> 23 March 2026
<input type="checkbox"/> Non-Award Study	<input type="checkbox"/> 27 July 2026
	<input type="checkbox"/> 07 September 2026
	<input type="checkbox"/> 16 November 2026



Are you seeking Advanced Standing (Credit Transfer)?  Yes  No

If yes, please complete the details below, along with your relevant supporting documents (certified academic transcripts and unit outlines).

Graduate business management courses include opportunities for students to specialise. These specialisations will determine the number and type of credit granted. If you are applying to study a **Master of Business** or a **Master of Business Administration**, please indicate which specialisation (if any) you intend to take.

- Accounting
- Project Management
- Aged Care and Disability Services Management
- Healthcare Informatics
- No specialisation

Previous Institution/s in which studies were undertaken	Year completed
1.	
2.	
3.	



Previous subjects you wish BPP Institute to consider for advanced standing.	BPP Institute Unit / Subject Code (BPP Institute staff to complete)
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16.	



## EDUCATIONAL HISTORY

What is your highest qualification achieved?

In which country was this qualification achieved?

Additional qualifications achieved?

Please list all previous studies in Australia whether successfully completed or not

Start Date	End Date	Provider	Course

## EMPLOYMENT STATUS

Of the following categories, which BEST describes your current employment status?

- Full – time employee
- Part – time employee
- Employer
- Not employed – not seeking employment
- Employed – unpaid worker in a family business
- Self-employed – not employing others
- Unemployed – seeking part-time work
- Unemployed – seeking full-time work



## LANGUAGE

Do you speak a language other than English at home?  Yes  No

If yes, please specify language/s:

Give details of the score/grade that you obtained in an English Language Examination:

English Examination	Grade/Score	Date
<input type="checkbox"/> IELTS		
<input type="checkbox"/> PTE		
<input type="checkbox"/> TOEFL		
<input type="checkbox"/> Other (please specify):		

Are you currently or planning to study English whilst in Australia?  Yes  No

If yes, please specify at which education provider:

## STUDY REASON

Of the following categories, which BEST describes your main reason for undertaking this course?

- To get a job
- To start my own business
- To try for a different career
- To get a better job/promotion
- It was a requirement of my job
- I wanted extra skills for my job
- To develop my existing business
- To get into another course of study
- For personal interest or self-development
- Other reason – please specify:



## SPECIAL NEEDS

Do you consider yourself to have permanent and significant special needs requirements?

Yes  No

If yes, please indicate which one(s):

Hearing/Deaf  Intellectual

Medical Condition  Vision

Physical  Learning

Mental Illness

Other (please specify):

## MARKETING

How did you hear about BPP Institute?

BPP Institute Website

Existing or Past BPP Institute Student

Facebook / Instagram / TikTok

Exhibition / Fair

Education Agent

Other (please specify):



## DOCUMENTS ATTACHED TO THIS APPLICATION

Certified Academic Transcripts

A copy of Australian Visa (if applicable)

A clear colour copy of your passport

(In cases where holographic imagery obscures the passport photo, provide a clear colour passport photo.)

Advanced Standing Application Form (if applicable)

IELTS Certificate or equivalent proof of English

## DECLARATION

I, \_\_\_\_\_ acknowledge that I have read and understood the information provided above. I also acknowledge that I have read BPP Institute's student prospectus, website, marketing material, and received full information from BPP Institute's educational agent (for enrolment through an educational agent) before deciding to enrol in the course. The information and documents provided by me are true, genuine, and correct in all respects.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_



## SEND YOUR APPLICATION AND DOCUMENTS TO:

Email: [Admissions](#)

Post: Admissions, BPP Institute  
Level 4, 108 Lonsdale Street  
Melbourne VIC 3000

This form aligns with BPP Institute Admissions Policy and Procedure. Please refer to the policy and/or procedure on the BPP Institute website [BPP Institute](#) for more information.

### Privacy Statement

BPP Institute collects personal information about you for the purposes of enrolling you into your chosen course(s) or program(s) of study. It is essential that you supply us with current and accurate details in order to process your enrolment. We may also collect and use your information to improve our products and services. BPP Institute will ensure that your personal information is always stored securely and will not be traded improperly. Any disclosure of your data and personal information will be done in strict adherence to BPP Institute's Privacy and Personal Information Policy and the Privacy and Data Protection Act 2014 (VIC). Please contact our student services if you have any concerns or wish to make a privacy complaint at [Student Experience](#).