

Enrolment Application Form

Personal In	formation								
First Name:		Middle Name:		Last Name:					
Preferred Name:		Date of Birth:	DD/MM/YYYY	Place of Birth:					
Nationality:		Email:		Phone:					
Gender:	National ID Number (if applicable):								
Present Address:									
City:		J I	State/Province:						
ZIP/Post Code:		7 7	Country:						
Emergency Contact	Name:	Relationship:							
Address:				Phone:					
Course you wish to enrol: BSB50820 Diploma of Project Management BSB50420 Diploma of Leadership and Management Any other Visa Holder BSB80120 Graduate Diploma of Management (Learning) Intake Dates 15/07/2024 14/10/2024 13/01/2025 14/04/2025 13/10/2026 13/07/2026 12/10/2026									
Education/Employment									
Your highest qualification and Institute:									
Year you have completed your recent studies:									
Your current employment status:									



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La	guage/Cultural Diversity/Disabilities							
Do	ou speak any language other than English?							
Do	ou consider yourself to have a disability? Yes No							
If yo	have marked "Yes" for above question, please mention your current state of disability:							
	dy Reason e following categories, select the one which best describes the main reason you are undertaking this course: or employment To acquire job promotion To start my own business To develop my existing business							
	To design in a des							
	or personal interest or self-development Others:							
	Any questions may be referred directly to Australian National Institute of Management for further information before proceeding with the enrolment. Only the student/guardian signature on this application form will be deemed as valid and agreeing to the course selection including fees and conditions of enrolment. Documents which are not in English must translated in English.							
4.	This enrolment will not be processed until Australian National Institute of Management has received a completed and signed copy of this							
5.	Prospective applicants seeking to enrol with Australian National Institute of Management are required to submit acceptable documents such as certified Identification document, educational qualifications, proof of English proficiency or any other documents required by ANIM.							
6.	Incomplete applications will result in delays in the admission process.							
7.	 Successful applicants will receive a Letter of Offer and Acceptance Agreement with course details, conditions of study, payment of tuition and other fees. 							
Plea	se make sure the following are attached							
	Certified Government Issued Identification							
	Certified copy of qualifications/transcripts							
	Related work experience (if any)							



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Student Declaration

In signing and submitting this 'Enrolment Application' the applicant acknowledges:

- 1. I declare that the information submitted with this application is true and complete.
- I acknowledge that failure to provide any document or disclose my academic record may result in Australian National Institute of Management revoking an offer or terminating my studies at any stage.
- 3. I authorise Australian National Institute of Management to seek verification of my academic and professional qualifications and work experience.
- 4. I acknowledge that Australian National Institute of Management. reserves the right to alter any course, subject, admission requirement or fee without prior notice.
- 5. I understand that the personal information I have provided may be released to government agencies as required by law.
 I further understand that it may be disclosed to third parties for the purpose of this application.
 I also undertake to update about any address/contact detail change within 5 working days in writing to the institute.
- 6. I acknowledge that I have read and understand the description of the course that I am applying for on Australian National Institute of Management's website.
- 7. I agree to pay the applicable tuition fees prior to commencement of nominated studies set out on Offer Letter and I agree to be personally liable to the debt arising from fees owing.
- 8. I declare that my signature is true and correct I acknowledge and agree to the terms in the student declaration.

Application Accepta	ance				
D D / M M /	YYYY				
Name of Applicant		Signature of Applicant/Guardian			
Agency Details (if ap	pplicable)				
Agency Name:					
Agency Branch Office:				Agency Stamp (if applicable)	
	Y Y Y Y				
Agency Staff Nar	me	- P	Agent's Representative	Signature	