

APPLICATION FOR ADMISSON

Please send your completed application form
with attachments and current photograph to:

Harvest West Bible College
P.O Box 128
Belmont WA 6985



PERSONAL DETAILS

Title _____ Family Name _____ First Name _____

Middle Name _____ Preferred Name _____

Marital Status Married* Single Other _____ *Maiden Name _____

Date of Birth _____ / _____ / _____ Gender Female Male

Home Phone _____ Work Phone _____ Mobile _____

Fax (h) _____ E-mail _____

Important as we will communicate with all students via email.

Residential Address _____

State _____ Postcode _____

Postal Address **As above** _____

State _____ Postcode _____

Permanent Home Address **As above** _____

State _____ Postcode _____

Are you and Australian citizen? No Yes Country of Birth _____

If born overseas, year of arrival _____ Country of Citizenship _____

If born overseas, please supply a certified copy of Birth Certificate or Passport.

If you are not an Australian citizen, are you a Permanent Australian Resident?

No Yes

If Yes, you must provide evidence of Residency.

Are you of Aboriginal and / or Torres Strait Islander origin? No Yes, Aboriginal Yes, Torres Strait

Are you an Overseas Student? No Yes

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

If Yes, which language? _____

PERSONAL DETAILS- continued

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

No Yes

If Yes, please indicate:

Hearing Learning Vision Medical

Mobility Other _____

Would you like to receive advice on support services, equipment and facilities which may assist you?

No Yes

PREVIOUS EDUCATION DETAILS

Secondary Level *Please include copy of academic record or award*

School attended _____ State _____ Postcode _____

Year 12 completed No Yes Year that you left/completed school _____ TER Score _____

Name of town/suburb where you lived in your last year of secondary school:

Town/Suburb _____ Postcode _____

If an Overseas student -

Country of Studies _____ Language of Studies _____

Tertiary Level (or other relevant studies) *Please include copies of academic transcripts*

Institution _____

Course Name _____ Year Award granted _____

If incomplete, year withdrew _____ If incomplete, indicate proportion completed: _____

Are you currently studying elsewhere?

No Yes

If Yes, complete the following:

Institution _____ Course Name _____

Part-time Full-time

Have you previously been studied at HWBC? No Yes Student No _____

HARVEST WEST COURSES

Please indicate which course you are seeking admission into:

- Graduate Diploma of Theology Bachelor of Arts (Biblical Studies) Bachelor of Arts (Ministry)
- Diploma in Ministry (all coursework) Diploma in Ministry (Internship)
- Youth Counselling
 Pastoral Leadership
- Certificate IV in Ministry (all coursework) Certificate IV in Ministry (Internship)
- Youth Counselling
 Children's Creative Arts
 Pastoral Leadership

When do you wish to begin study? Year _____ Semester 1 Semester 2

Are you intending to study: Full Time Part Time **and** On Campus External Combination

On what basis are you seeking admission?

- Higher School Certificate or equivalent
*copy of transcript
- Secondary Education*, TAFE or equivalent
*copy of transcript
- Higher Education*(eg. Degree)
*copy of transcript
- Professional Qualification*
*evidence required
- Mature age*
*copy of driver's license
- Special entry*
*evidence required

CREDIT TRANSFER

Do you want to apply for credit for previous study? Yes No

If Yes, please include copies of previous study transcripts (signed by JP, Lawyer, Com.Dec, Accountant, School Principal, Bank Manager or HWBC staff) Transcripts must be cited by HWBC staff to finalize transfer

PARENTS EDUCATION

The Department of Employment, Education and Workplace Relations requires this information to be collected for statistical purposes. It will not be used by HWBC in the assessment of your application for admission.

Parent / Guardian 1

Male Female No parent/guardian

What is the highest level of education completed by your parent/guardian 1?

- Postgraduate qualification (e.g. GradDip, Masters)
- Bachelor degree
- Other post-school qualification (e.g. Assoc. Degree, Diploma, Apprenticeship, VET/TAFE Certificate)
- Completed Year 12 schooling
- Completed Year 10 schooling, continued, not yr 12
- Completed Year 10 schooling
- Didn't complete Year 10 schooling
- Don't know

Parent / Guardian 2

Male Female No parent/guardian

What is the highest level of education completed by your parent/guardian 1?

- Postgraduate qualification (e.g. GradDip, Masters)
- Bachelor degree
- Other post-school qualification (e.g. Assoc. Degree, Diploma, Apprenticeship, VET/TAFE Certificate)
- Completed Year 12 schooling
- Completed Year 10 schooling, continued, not yr 12
- Completed Year 10 schooling
- Didn't complete Year 10 schooling
- Don't know

STUDY/LABOUR IDENTIFIER

Reason for study

- Employment Increase skills Self development Job requirement Try a different career
- Start a business Develop an existing business To gain entry to a different course Other

Employment

- Full Time Part Time Self Employed Employer Unpaid Employee Seeking Full Time Employment
- Seeking Part Time Employment Unemployed

NEXT OF KIN

Name of Kin _____

Address of Kin _____

Postcode _____ State _____ Country _____

Phone _____ Email _____

Relationship to you _____

ENGLISH PROFICIENCY – OVERSEAS STUDENTS

Is English your first language? No Yes

(If English is not your first language, you will be required to complete an IELTS test)

If you have completed an English test...

Name of English Language Test Completed:

_____ Test Date _____ Test

Score _____

Please include a copy of the Test Results.

CHOOSING HARVEST WEST

Why have you chosen to study with HWBC? _____

- How did you discover this College? Web Exhibition Advertising
- Student _____ Church _____
- Other _____ Staff _____

REGISTRATION FEE

CERTIFICATE IV ONLY

Registration fee:

- Certificate IV ONLY - \$60 (Please fill out payment details below)
- Please find enclosed my registration fee of \$60 Cheque/Money Order/Cash
- I wish to deposit the funds in the HWBC Account **BSB 066 153 Account 1038 0839** please include your name in the transaction details
- Please debit my credit card \$60

Name on card _____ Mastercard/Visa/Amex/Other _____

Card number ____ / ____ / ____ / ____ Expiry ____ / ____

Signature _____ Date ____ / ____ / ____

FEES

I commit to pay my Fees as follows:

- I wish to apply for VET FEE Help (Diploma) or FEE-Help (Degree)
- I have completed and enclosed a form
- Please send me a form
- I wish to pay part of my fees with VET FEE Help or FEE-Help and pay the rest myself (Diploma & Degree only)
- Upfront Amount to be paid \$ _____ FEE Help/VET FEE Help Amount \$ _____
- I have completed and enclosed a form
- Please send me a form
- The full amount has already been paid. (Date) ____ / ____ / ____
- I will be paying the full amount before Friday 30th July 2010
- I would like to enter a Fees Contract with a Fortnightly Payment Plan (Payments scheduled to begin the week of orientation and be paid in full by Wk 10 of the semester, please see semester calendar for specific dates)
- I will pay by Cash/Cheque/Online Banking **BSB 066 153 Account 1038 0839** please include your name in the transaction details
- I would like my credit card debited for each payment (you will be provided with an authorization form)
- My church will be paying the full amount by ____ / ____ / ____
- Church Name _____
- Address _____ Postcode _____
- Phone _____ Fax _____ Email _____
- Contact's Name _____ Mobile Number _____

*Overseas student fees must be paid in full prior to the commencement of each semester

Harvest West appreciates your commitment to pay your fees on time. We ask that should you have difficulty making a payment that you contact the finance officer as soon as possible at finance@harvestwest.edu.au or at the college on 9479 3443

APPLICATION CHECKLIST

copies required

- | | |
|--|--|
| <input type="checkbox"/> Birth Certificate or Passport | <input type="checkbox"/> FEE Help/VET FEE Help Application (if applicable) |
| <input type="checkbox"/> Recent photograph | <input type="checkbox"/> Working With Children Card (required for Interns) |
| <input type="checkbox"/> Pastors reference form | <input type="checkbox"/> Evidence of residency (if required) |
| <input type="checkbox"/> Financial Agreement Form/Registration Fee (if applicable) | <input type="checkbox"/> IELTS Test Results (if required) |
| <input type="checkbox"/> Academic Transcript secondary and/or tertiary (certified) | <input type="checkbox"/> Other _____ |

PRIVACY AGREEMENT

In accordance with Privacy Legislation, HWBC keeps your academic progress and financial position confidential. This means we must have your permission to discuss these matters with your pastor and/or relevant person and a parent/guardian for those under 18 years of age. HWBC requests that you release us to discuss your academic progress and as required, financial standing with the college, with your pastor or relevant person. Please also note that HWBC will be required to provide your personal information to third parties (eg educational institutions such as accreditation bodies and Australian government bodies such as DEST, Centrelink and the Department of Immigration and Citizenship, Tuition Assurance Scheme, ESOS Assurance Fund Manager) in order to provide you with education services and assess your academic progress or suitability. You can request access to your personal information by contacting the Registrar.

I give Harvest West Bible College permission to discuss my academic progress as required with the following people:

- Pastor Parent Spouse

I understand and accept the privacy legislation.

Signature _____ **Date** _____ / _____ / _____

MEDIA RELEASE

During the year Harvest West Bible College Inc will be recording classes and may also ask you to be included in photos that we will use for promotion of the College which may be used video clips and/or photos. With this in mind we ask that you sign the media release statement below to allow us to use photos or video footage which includes your image.

I grant release for Harvest West to use my image in promotional videos and recorded classes as well as photos to be used in promotional material and the website

- Yes No

Signature _____ **Date** _____ / _____ / _____

DECLARATION

I wish to be considered for entry into the course that I have nominated. I declare that the information that I have provided herein is true and accurate to the best of my knowledge. If accepted by Harvest West Bible College Inc, I agree to abide by all of the rules and regulations. I have read and understood the Code of Conduct of the College. I agree to honor any financial obligations to the College. I agree to support the college at all fundraising endeavors including the annual fundraiser.

Signature _____ **Date** _____ / _____ / _____

OVERSEAS STUDENTS

CRICOS 01456D

Please complete the additional International Student form (YELLOW FORM) included in your prospectus pack and return with this application and Registration fee. Applications will only be processed when all of the above has been received.

PLEASE NOTE:

While every effort is made by Harvest West to ensure the program is delivered as described HWBC reserves the right to withdraw subjects at any time, change fees, rules, calendars, curriculum, programs, procedures and any other requirement deemed necessary. Although every effort is made to ensure the accuracy of information at the time of publication, this document shall not be construed to be an irrevocable contract between the student and the college.

Inspire
LEADERSHIP ACADEMY



**Harvest
West**

Bible College Inc.

Dear Pastor,

Your confidential reference will assist us to ascertain this applicant's suitability to study at Harvest West Bible College Inc. Your comments are important and we ask that you complete and sign this form. Please hand the completed form in a sealed envelope to the applicant to enable their application to be processed. Alternatively, this form can be emailed to registrar@harvestwest.edu.au please include the student name in the subject line. Thank you for your time and input into this application.

Statement by Applicant's Church

We, the leaders of the _____ Church have prayerfully considered the claim of _____ to be called by God to train for service with Harvest West Bible College.

Do you agree that such a call is consistent with his/her Christian life, and that he/she would seem to have the necessary application, discipline and consecration to achieve success? Yes No

Please comment on any areas of concern or recommendation:

How do you consider the applicant?

Recent Believer Immature Growing Mature Experienced Leader

Are you aware of any hindrances that might prevent the applicant coping with studies?

Physical Academic Spiritual/Moral Psychological Financial Problems

What areas of future ministry do you think the applicant should develop?

Pastoral Evangelism Administration Teaching Creative Ministry Marketplace Ministry Youth
 Children's Ministry Missions Other _____

Do you recommend the applicant for study at HWBC?

Yes Yes, with reservations No

Do you expect to provide practical ministry and/or coaching for the student? Yes No

If Yes, HWBC seeks your commitment to:

- provide genuine opportunities for real ministry
- ensure the applicant finds adequate supervision and care

Please sign below if you agree to support the student in these ways:

Name: _____ Position held: _____

Signed: _____ Date: _____

Church Name _____

Postal Address _____

Phone Business _____ Mobile _____ Email _____

This form is an agreement between the student and the supervisor as it applies to HWBC Practical Ministry requirements. This form is for HWBC records only. It assists in HWBC's endeavor to promote effective training and mentoring for all students.

Student Name _____ Senior Minister _____

Church/Organisation _____

It is agreed that the senior minister agrees to provide supervision & opportunity for the student in ONE OR MORE OF THE FOLLOWING STREAMS: (Leave blank if not applicable to student)

CHURCH LIFE General Area(s) of involvement: _____

Immediate Supervisor _____

CHURCH LEADERSHIP Specific Areas of Involvement: _____

Immediate Supervisor _____

ORDAINED MINISTRY Specific Areas of Involvement: _____

Immediate Supervisor _____

This form is not a legal document and no persons shall be held to fulfill this agreement other than by mutual consent. It is a record only and can be revoked by either party at any time. It is agreed that HWBC will be notified of any changes.

Student's signature _____ / ____ / ____ date

Supervisor's signature _____ / ____ / ____ date