AGENT DETAILS	
Name of Representative:	
Location (Region/Country)	



Genuine Student Checklist Form

RTO NO: 41204; CRICOS CODE: 03427D

This form is to be completed by Sydney Metro College Representative/Agent

This form is to be used for assessment of international students interested to study Sydney Metro College and who are required by Australian Law to meet the Department of Home Affairs' Genuine Student requirement set out in the Ministerial Direction 106 which is a key legislative provision and integrity measure in the assessment of student visa applications.

Representatives of Sydney Metro College process. Please complete in full, sign the							
•			<u></u>				
SECTION 1 – APPLICANT DETAILS							
Family Name							
Given Name							
Date of Birth			Gender				
Country of Citizenship		St	udent ID				
SECTION 2 – PROGRAM DETAILS							
Program Applied For							
Intake (TERM 1, 2, 3 OR 4)		Campus	Sydney 🗌		Melbourne		
SECTION 3 – GS CHECKLIST							
A) APPLICATION				YES	NO		
Has the applicant been advised of their p							
tuition fees, campus location, and career	Ш						
Have original or certified documents been							
Have academic documents for all relevan							
Has the applicant ever been excluded from If yes, please detail when this occurred, which could							
B) RELATIONSHIPS	YES	NO					
Is the applicant married? If yes, please attach applicant's marriage certificate							
Does the applicant have children? If yes, please provide names and ages of all children in Section 6.							
Does the applicant intend to travel to Aus If yes, please specify the intended activities (study)							
Does the applicant have any relatives living lyes, please provide details of their visa/citizenships.							
C) IMMIGRATION HISTORY	YES	NO					
Does the applicant (or accompanying family members) have any visa refusals for Australia or any other country?							
If yes, please provide details of this in Section 6 and attach the decision record(s) for the visa refusal(s) with this form.							
D) STUDY AND EMPLOYMENT H	YES	NO NO					
Are the applicant's education, qualification chosen program of study and future pros							
Are there any gaps in the applicant's study or employment history? If yes, please provide details of this in Section 6 and any additional documentation to address this gap with this form.							
E) ACKNOWLEDGEMENTS					NO		
Does the applicant understand that their visa may be refused or cancelled if:	Fraudulent documentation is determined?	on supporting this	application				
	They do not pass the DH	A's health and ch	aracter checks?				
	The DHA is not satisfied that they meet the genuine student criterion?						
	They do not abide by the conditions of their visa?						
Is the applicant aware that program fees are indicative and subject to change?							
Is the applicant aware that they may unde							
Does the applicant understand the cost of living financial requirements (tuition, accommodation, living expenses) for the designated program of study and duration in Australia?							

Have you confirmed and verifice in Section 4? If applicant require sponsors' affidavit(s) affirming relationships and the section of the sect	s continued sponsor	ship throughout the	eir studies,		relevant			
SECTION 4 – FINANCIAL	DETAILS							
Please list the applicant's						-	Section 6.	
Source of Funds	nay request additional details of Name of Sponsor		Relationship with			Annual income of sponsor or applicant		
				Applicant			(UD)	
					()			
			TO	TAL FUNDS	(AUD)			
Source of Funds	Nan		ne of Bank/Financial Intitution			Amount		
			TO	TAL FUNDS	(AUD)			
SECTION 5 – ADDITIONA	U DETAILS / C	CDECDONCEC						
SECTION 5 - ADDITIONA	L DETAILS / G.	J KLSFONSLS						
SECTION 6 – DECLARATI	ON							
Counsellor Name			E-mail	Address				
As Sydney Metro College's offind is a specific to the specific of all the specific of all the specific of all the specific of a			all informa	ation provided	d is true a	nd accurate and	d that I have	
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Counsellor Signature:				Date:				