



## STUDENT FINANCIAL DECLARATION FORM

(To be completed by the applicant)

**Surname/Family Name** (As per Passport)

**First Name(s)** (As per Passport)

**Previous Name(s)**

Title (e.g. Mr, Miss)

Gender  Male  Female

Date of Birth (D) (M) (Y)

Country of Birth

Passport No

Nationality (As per Passport)

**Correspondence Address:**[Street, Town, Country]

Post/Zip code

**Permanent Home Address [if different from above]**

Address [Street, Town, Country]

Post/Zip code

Phone No [Area Code and Number]

Fax No

Email Address

Mobile/Cellular No

Proposed course(s) of study: \_\_\_\_\_

### STUDENT DECLARATION

I declare that I have a genuine intention to study the course(s) for which I have applied, and that I have or intend to apply for access to sufficient funds to cover tuition fees, Overseas Student Health Cover, and living expenses for the duration of my studies.

The funds I will need to have access to for the full duration of study are as follows:

Expenses	Per Person (complete as appropriate)	Amount required in AUD\$	Number of family members / children	Amount in AUD\$	I confirm that I have access to these funds(✓)
Travel	Yourself	Return air fare to Australia			
	Family members	One return air fare to Australia for each additional family member			
Tuition	Yourself	Course fees			
	Children aged 5-18	AUD 8,000 per year / per child			
Living	Yourself	AUD 18,610 per year			
	Partner	AUD 6,515 per year			
	First child	AUD 3,720 per year			
	Each additional child	AUD 2,790 per year			

My anticipated total expenses will be AUD\$ \_\_\_\_\_ which will be funded from the following sources:

	Personal or Family Savings	Bank Loan	Sponsorship	Other
<b>Amount (\$)</b>				

Name of Sponsorship / Scholarship / Loan provider: \_\_\_\_\_



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AUSTRALIA

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I confirm that these funds are to be used for no other purpose than to support me in my course of study. I am fully aware that any false or misleading statement may result in an automatic denial of my admission request or subsequent cancellation of my enrolment at Le Cordon Bleu, which in turn may affect the validity of my visa.

I warrant that all the information provided on this form is correct. I acknowledge and agree that the personal information I provide to Le Cordon Bleu Australia will be handled by Le Cordon Bleu Australia in accordance with the Le Cordon Bleu Australia Privacy Policy. I warrant that any third parties whose personal information I provide to Le Cordon Bleu Australia have consented to me disclosing this information to Le Cordon Bleu Australia and for Le Cordon Bleu Australia to handle their information in accordance with the Le Cordon Bleu Australia Privacy Policy. I and all relevant third parties acknowledge that the personal information I have provided on this form and otherwise provided to Le Cordon Bleu Australia may be disclosed to the Australian Government in accordance with relevant laws. This information includes personal and contact details, course enrolment details and changes, and the circumstances of any suspected breach by the student of a student visa condition.

Signature of Applicant

Date

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### WITNESS DECLARATION

I confirm that I have viewed a valid form of ID and that this "Student Financial Declaration Form" has been signed in my presence by

Signature of authorised witness:

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Name of authorised witness:

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Qualification as witness:

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Address of witness:

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Witness stamp

### Please return this form to:

Le Cordon Bleu Admissions Office,

Days Road, Regency Park, South Australia, Australia 5010

Email: [admissionsaustralia@cordobleu.edu](mailto:admissionsaustralia@cordobleu.edu)

Website: [www.lecordobleu.com.au](http://www.lecordobleu.com.au)

Telephone: +61 8 8348 3000

Facsimile: +61 8 8348 3081

CRICOS Provider No. (SA) 01818E (NSW) 02380M