

STUDENT INFORMATION

*Name:		
*Date of birth: / /	*Age:	Phone:
Nationality:	Gender: Male / Female	Email:
Home County Address:		
City:	State:	Country:
Passport Number:	Passport Expire Date:	Passport Country:

PARENTS INFORMATION (FATHER)

*Name:		
Date of birth: / /	*Mobile:	*Email:
Nationality:		
Home County Address:		
City:	State:	Country:

PARENTS INFORMATION (MOTHER)

*Name:		
Date of birth: / /	*Mobile:	*Email:
Nationality:		
Home County Address:		
City:	State:	Country:

EMERGENCY CONTACT (IF APPLICABLE)

Name:		
Relationship:	Phone:	Email:

PRIOR EDUCATION DETAILS

Year	Name of Institution	Qualification / Level / Award

LANGUAGE

First Language:	Second Language:
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ENGLISH LANGUAGE PROFICIENCY

Year	English Language Test	Overall Score

PROGRAM DETAILS

Please check the programs on our website ankgolf.com or ankgolf.com.au

High Performance Program A	<u>School Term</u> Monday – Thursday (3:00pm – 6:30pm) Friday (7:00am – 6:30pm) Saturday (7:30am – 4:30pm)		
High Performance Program B	<u>School Term</u> Monday – Thursday (3:00pm – 6:30pm) Friday (7:00am – 6:30pm) Saturday (7:30am – 4:30pm) <u>Holiday Term</u> Monday – Friday (7:00am – 6:30pm) Saturday (7:30am – 4:30pm)		
Excellence Program A	<u>School Term</u> Wednesday (3:00pm – 6:30pm) Saturday (07:30am – 4:30pm)		
Excellence Program B	<u>School Term</u> Tuesday – Thursday (3:00pm – 6:30pm) Saturday (07:30am – 4:30pm)		
Professional Performance Program A	Monday – Friday (7:00am – 6:30pm) Saturday (7:30am – 4:30pm)		
Professional Performance Program B	Tuesday, Thursday (7:00am – 6:30pm) Saturday (7:30am – 4:30pm)		
Golf & English Program	Monday – Friday (8:30am – 4:30pm)		
Holiday Program	Monday – Friday (8:30am – 3:00pm)		

PROGRAM SUMMARY

Please check the programs on our website ankgolf.com or ankgolf.com.au

School Program High Performance Program A High Performance Program B Excellence Program A Excellence Program B Experience Program	Weeks / Days / Hours 37 weeks / 6 days / 34 hours a week 48 weeks / 6 days / 34 hours a week 37 weeks / 2 days / 12.5 hours a week 37 weeks / 4 days / 19.5 hours a week One day trial	
Amateur Program Professional Performance Program A Professional Performance Program B	Weeks / Days / Hours Customize / 6 days / 66.5 hours a week Customize / 3 days / 27 hours a week	
Touring Professional Program	Fully Customize by player's request	
Short Term Program Golf n English Program Holiday Program	Weeks / Days / Hours Customize / 5 days / 41.5 hours a week Customize / 5 days / 32.5 hours a week	

Program you wish to enrol/duration of program:

GOLF HISTORY

Current Handicap (Average Score):		Best Score:	
Years of Playing Golf:		Fitness Training: Yes /No	Mental Training: Yes /No
Injury: No /Yes (Please explain: _____)			
Tournament Experience:			

VISA OPTIONS

*Marlin Immigration Agent		
ETA	Maximum 90 days	
Tourist Visa	Depends on the case	
Student Visa	Current year level to Year 12	
Certificate II & III & Diploma of Sport Development (Ace Sports Academy)	1 year to 3 years	

HEALTH INSURANCE

Yes	(Please provide insurance membership number/ provider: _____)	No
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ACCOMODATION (*HOMESTAY \$230 PLACEMENT FEE APPLIES)

Options	Minimum Stay	Fee Structure
ANK HOMESTAY (KOREAN)	1 week	\$450 per week
AUSTRALIAN HOMESTAY	1 week	\$300-350 per week
SHORT TERM RENT	3 months	Approx \$500 week/per unit (2 bedroom)
SHARE ROOM	2 weeks	\$150-200 week/per person
HOLIDAY HOUSE	1 weeks	\$1100 week/per house (3 bedrooms)

Accommodation you wish to stay:

Arrival Date:	Departure Date:
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SIGNATURE

I authorise the AnKGOLF to obtain information concerning my academic records from any school, university or other institution attended by me. I agree to inform the AnKGOLF promptly should I be excluded, suspended, or expelled from any tertiary institution during the period of my enrolment at the AnKGOLF. I consent to the collection, storage, and disclosure of information, for student and or provider audit purposes, concerning any acts of record falsification or other irregular acts in relation to my academic records. I acknowledge that the AnKGOLF may vary or reverse any decision made on the basis of incorrect or incomplete information supplied by me.

NAME:	DATE:
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SIGNATURE: