

Australian Government

Department of Home Affairs

Who should use this form?

You should use this form if you are an Education Provider (as per the definition in the Education Services for Overseas Students Act 2000) supporting a COVID-19 impacted student who is:

- eligible for a nil visa application charge for a new Student (Subclass 500) visa application if they are unable to complete their approved course of study within the original visa validity due to COVID-19, or
- seeking to have online study undertaken outside Australia as a result of COVID-19 travel restrictions counted towards the Australian Study Requirement.

Information on eligibility is available from the Department of Home Affairs (the Department) website www.homeaffairs.gov.au

Important - Please read this information carefully before you complete this form. Once you have completed this form we strongly advise that you keep a copy for your records.

Integrity of information

The Department is committed to maintaining the integrity of the visa and citizenship programs. Please be aware that if you provide us with fraudulent documents or claims, this may result in processing delays and possibly the arrangement being refused. If documents are found to be fraudulent or information to be incorrect after the grant of a visa, the visa may subsequently be cancelled.

Completing this form

Please open this form using Adobe Acrobat Reader. Either type (in English) in the fields provided or print this form and complete it (in English) using a pen and BLOCK LETTERS.

In order to complete this form you must first read these notes and the information available from the Department's website www.homeaffairs.gov.au.

Lodging this form

Education providers should provide this completed and signed form to the impacted student who must include this form together with either:

- form 157A (internet) Application for a student visa if the student is applying for a Student (Subclass 500) visa, or
- form 1409 (internet) Application for a temporary graduate visa if the graduate is applying for a Temporary Gradate (Subclass 485) visa.

This form will only be accepted as part of a visa application and must be provided at time of online lodgement.

If the student does not meet COVID-19 impacted eligibility or fails to submit this form at the time of lodgement, the application could be invalidated. The student would be required to submit a new application.

Important information about privacy

The Privacy Act 1988 contains 13 Australian Privacy Principles which regulate the way that the Department collects and handles personal information. Information about how the Department collects, uses and discloses personal information for its key functions can be found in form 1442i Privacy notice. More information about the Department's general information handling practices (including form 1442i) can be found in the Department's Privacy policy at https://www.homeaffairs.gov.au/ access-and-accountability/our-commitments/privacy

Home page www.homeaffairs.gov.au

General enquiry line

Telephone 131 881 during business hours in Australia to speak to an operator (recorded information available outside these hours). If you are outside Australia, please contact your nearest Australian mission.



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Tick where applicable

Part A – Education Provider details

1 Registered provider name

Cricos registration number

Part B – Student details

Given name	es						
		Day	Month	Year	-		
Date of birt	h						
Details from	Details from the student's passport						
Passport ni	umber						
Country of	passport						
Which visa Tempora <i>Part C</i>	Stude ary Gradua	nt (Subc te (Subc	lass 500 lass 485) visa [) visa [► Go		
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Part D – Temporary Graduate (Subclass 485) visa applicant

		Day	IVIONTN	Year		
11	Online study commencement date					
12	Online study end date					
13	Name of course					
14	CoE number					

Part E – Declaration

This section to be completed by the Education Provider.

15 I declare that:

- I have read the information contained in form 1442i Privacy notice.
- I understand the Department may collect, use and disclose my personal information (including biometric information and other sensitive information) as outlined in form 1442i *Privacy notice*.

Signature of provider	Þ				
	Day	Month	Year		
Date					
Full name					
Title/position at	t the ed	ucation in	stitution		

Telephone number