MILC
Melbourne Intercultural Learning Centre

BOARDING HOUSE APPLICATION FORM

1. STUDENT INFORMATION

Surname: _____ **First Name:** _____

English / Preferred Name: _____ **Date of Birth (DD/MM/YYYY):** ___/___/_____

Gender: ☐ Male ☐ Female ☐ Other **Nationality:** _____

Primary Language: _____ **Passport Number:** _____

Visa Type: ☐ Student ☐ Other (please specify): _____

2. PARENT / GUARDIAN INFORMATION

Parent/Guardian 1 Name: _____ **Relationship:** _____

Phone (Home): _____ **Mobile:** _____ **Email:** _____

Residential Address: _____

Parent/Guardian 2 Name: _____ **Relationship:** _____

Phone (Home): _____ **Mobile:** _____ **Email:** _____

Residential Address: _____

3. BOARDING & ROOM SELECTION

Preferred Boarding Option: ☐ Full-time (7 days) ☐ Casual (by days)

Proposed Check-in Date: ___/___/_____ **Proposed Check-out Date:** ___/___/_____

Please select your room type preference (Effective from 1 July 2026. Note: A once-off Placement Fee of $250 applies to all boarding students. Fees include free self-served breakfast, unlimited internet, pastoral care, and facility access):

☐ Single Occupancy Room	**AUD $680 / week**
☐ Shared Room (Up to 2 people)	**AUD $500 / week**
☐ Shared Room (Up to 3 people)	**AUD $320 / week**
☐ Shared Room (Up to 4 people)	**AUD $300 / week**

4. MEAL PLAN SELECTION

Select your meal requirements below. Daily rates: **Lunch - $20/meal** (Sandwich, Sushi, Wraps, Fish & Chips, etc.) | **Dinner - $25/meal** (Hot served meal). Self-served breakfast is free.

Meal Preference: ☐ Full Week (Mon - Sun) ☐ Custom Days Selection (Please check boxes below)

Day	Lunch ($20/day)	Dinner ($25/day)	Both ($45/day)

Monday	☐	☐	☐
Tuesday	☐	☐	☐
Wednesday	☐	☐	☐
Thursday	☐	☐	☐
Friday	☐	☐	☐
Saturday	☐	☐	☐
Sunday	☐	☐	☐

5. ADDITIONAL SERVICES & EXTRAS

- **Airport Transfer ($230 one way):** ☐ Yes ☐ No
  Flight Arrival Date & Time: _____ Flight No: _____
- **Welfare / Guardianship Service ($90/week):** ☐ Yes ☐ No
  *(Mandatory if legal guardian is not accompanying student onshore)
  If No, state local welfare provider: _____
- **After-hour Program ($385/week):** ☐ Yes ☐ No
  *(3-5pm Mon-Fri & Weekends; includes excursions, workshops & life skills)
- **Extended One-on-One Tutoring ($120/hour):** ☐ Yes ☐ No
- **Destination School:** _____
- **Educational Agent:** ☐ Yes ☐ No (Agent Name: _____)

6. MEDICAL INFORMATION & SPECIAL REQUIREMENTS

Medical Conditions: ☐ Yes ☐ No (If yes, specify): _____

Allergies: ☐ Yes ☐ No (If yes, specify): _____

Regular Medication: ☐ Yes ☐ No (If yes, specify): _____

Special Dietary Requirements: ☐ Yes ☐ No (If yes, specify): _____

Additional Requests or Concerns: _____

Onshore Emergency Contact (Other than Parent/Guardian):

Name: _____ Relationship: _____ Phone: _____

7. DECLARATION

I/We declare that the information provided in this application is accurate and complete. I/We understand that submission of this form does not guarantee a place at MILC Boarding House. If accepted, I/We agree to abide by the MILC Boarding House policies and procedures.

Parent/Guardian 1 Signature: _____ Date: ____/____/_____

Parent/Guardian 2 Signature: _____ Date: ____/____/_____

OFFICE USE ONLY

Application Received: ____/____/_____ Approved: ☐ Yes ☐ No

Processed By: _____ Date: ____/____/_____

Remarks: _____