

ENGLISH ORIENTATION SPEAKING TESTING

		English s	oeaking level
Name	DOB		
Student ID	_		
Country of origin			
Native language			
ELICOS course duration_			
Main course(s)			
How long have you been	in Australia?		
What studies have you co			
Have you worked in Austi			
What studies have you co	ompleted in your hom	·	
What job(s) have you dor	ne in your home coun	try?	
What Australian visa are	you on?		



Do you have any future career plan? Elaborate.			
Do you have an IELTS or other public English test scores?			
Student signature			
Date			
Director of Studies Signature			
Date			