

## Australian Education Advisory Services (AEAS)

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## **Client Information Sheet**

PERSONAL DETAILS	
Name	
Address	
Telephone / Fax	
E-mail	
Date of Birth	
Passport No.	
Marital Status	
Citizenship	
Primary Applicant	
Secondary Applicant	
Other Applicant(s)	
Sponsor (if applicable)	
Referred By:	
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(Brief Notes)

Signed by the Client:	Date:/2015
FO	OR OFFICE USE ONLY
Client ID:	
Visa Category:	
Date File Opened:	
Date File Closed:	