Partner - subclass 820/309 (Expression of Interest)

					T			
Name:								
Date of Birth:								
Preferred location in Australia:								
Would you live outside an Australian capital city?								
Have you completed an English Language test in the last 36 months?								
Do you have at least functional English?								
Education Hist	ory (Complete inf	forr	mation or attac	ch detailed CV)			
Qualification:		· ·			Qualification:			
Course					Course Name:			
Name:								
Institution:					Institution:			
Country:					Country:			
Dates:	Гил	om:	Тс		Dates:	From:		То:
dd/mm/yyyy	FIC	ли.	10).	dd/mm/yyyy	FIOIII.		10.
	isto	ny (last 10 ve:	ars)	\ (Complete inf	ormation or attac	h detailed ()	\/\	
Position:	13601	ly (last to ye	uis	, (complete iiii	Position:	Li uctaneu C	√ /	
1 031011.					i osition.			
Employer:					Employer:			
Country:		Country:						
Dates of		From:		To:	Dates of	From:		To:
Employment:				- *	Employment			
dd/mm/yyyy					dd/mm/yyyy			



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AGE		
Are you over the age of 18?	Yes	No
Is your partner over the age of 18?	Yes	No
YOUR RELATIONSHIP		
Are you in a married or defacto relationship with: (please tick relevant box)		
An Australian Citizen? An Australian Permanent resident? An eligible New Zealand citizen?		
If you are in a defacto relationship, how many years and/or months have you and your defacto been in a relationship for?		
SPONSOR		
Is your partner your sponsor?	Yes	No
HEALTH		
Have you completed the relevant health examination?	Yes	No
CHARACTER	•	
Have you met the character requirement?	Yes	No
DEBTS TO THE AUSTRALIAN GOVERNMENT		
Do you owe any debts to the Australian Government?	Yes	No
If yes, please provide details of the debts owed		

