

Application for a business (Short Stay) visa (for a stay of up to 3 months)

456

Department of Immigration and Multicultural and Indigenous Affairs

Who should use this form?

Genuine business visitors seeking short-term entry to Australia of up to 3 months for purposes such as:

official visits, to attend meetings, training purposes, building inspections or equipment installation.

Requirements

- Your personal attributes and business background should be relevant to the nature of your proposed business in Australia;
- There should be a demonstrated need for you to be in Australia for business purposes;
- You must have adequate funds for your personal support during your stay in Australia; and
- You must not undertake business-related employment or training activity that could have an adverse impact on the employment or training opportunities of Australian citizens or Australian permanent residents.

If you are coming to Australia for one of the following purposes you would generally be required to complete a different application form:

a tourist, a religious worker, an entertainer, a medical practitioner, for medical treatment, to attend secondary or primary school, to engage in a course leading to a degree, diploma, trade certificate or formal award.

About the business visas

Business (Short Stay)

If you tick the box Business (Short Stay) on page 5 of this form, this is an application for a single or multiple entry visa which provides for a stay of up to 3 months on each arrival. As the travel validity date can vary, you should check the travel validity date on your visa label. **An application for a Business (Short Stay) visa can only be made outside Australia.**

Sponsored Business Visitor (Short Stay)

If a Federal, State and Territory Member of Parliament, a government agency or local government mayor has agreed to sponsor your visit, you should apply as a Sponsored Business Visitor. Your sponsor should obtain form 1149 *Application for Sponsorship for Sponsored visitors* from their nearest office of the Department of Immigration and Multicultural and Indigenous Affairs (DIMIA) or from the DIMIA home page at: www.immi.gov.au

Your sponsor should complete and sign form 1149 and send it to you so you may submit it with your visa application.

A Sponsored Business Visitor will only be able to be granted a single entry visa valid for up to 3 months stay in Australia. An application for a Sponsored Business Visitor (subclass 459) can only be made outside Australia.

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	n your completed and signed application form 456, you at include:
	your valid passport and the valid passport of accompanying family members included in your application. The passport must be valid for at least the duration of your intended visit to Australia;
	the Visa Application Charge (VAC). Check with the relevant Australian Mission about the appropriate method of paying the VAC. If the Australian Mission overseas has advised that you may pay by credit card, complete the payment details on page 9 of this form. You should be aware that the visa application charge is not refundable regardless of the outcome of your application;
	a completed form 1149, which has been signed by your sponsor if you are applying as a Sponsored Business visitor;
	details of how you want your passport returned (if by mail, you should include a passport sized envelope with your address and sufficient postage);
	completed form 956, included at page 10, if you are authorising another person to act and receive communication on your behalf.

Additional documentation check list

You should be aware that under the *Migration Act 1958*, decision-makers are not obliged to request additional information from the applicant before making a decision on a visa application. It is therefore recommended that you submit the following documentation with your application:

evidence of your proposed business in Australia eg. letter of invitation, conference registration details, employment contract etc;

evidence that you have adequate funds for your personal support during your stay in Australia, eg. bank statements, letter from your financial institution concerning your financial position;

evidence that your business background is relevant to the nature of your proposed business in Australia eg. evidence of educational qualifications, evidence of current employment position and your role during the visit, details of any previous contacts with Australian business people or organisations, documentation indicating that the company is an actively operating business (business registration certificate, annual report);

evidence that there is a need for you to be in Australia for business purposes eg. a letter from your employer detailing the reasons for your visit, a letter of invitation from the host organisation in Australia, an itinerary with contact details of the business parties involved.

Continued on the next page

Residential address

You must provide the address of where you intend to live while your application is being dealt with. Failure to give a residential address in your application will result in your application being invalid. A Post Office box address will not be accepted as your residential address.

Health Insurance

It is recommended that you take out health insurance for you and your family for the period of your stay in Australia. You will not be covered by Australia's national health scheme, unless you are covered by a reciprocal health care agreement.

Vaccinations

If it is your intention to enrol your child in an Australian school or childcare centre (creche or preschool) during your visit to Australia, you are strongly recommended to carry certification of your child's vaccination status. Vaccination is recommended against polio, tetanus, measles, mumps, rubella, diphtheria, pertussis (whooping cough), Haemophilus influenzae hypo (Hib), and Hepatitis B. Certification may be sought at time of enrolment. **Note**: Vaccination against Rubella is also recommended for women of child-bearing age.

About the information you give

DIMIA is authorised to collect information provided on this form under Part 2 of the *Migration Act 1958* 'Control of Arrival and Presence of Non-Citizens'. The information provided¹ will be used to assess your eligibility for a visa and for other purposes relating to the administration of the Migration Act.

The information provided might also be disclosed to agencies who are authorised to receive information relating to adoption, border control, business skills, citizenship, education, health assessment, health insurance, health services, law enforcement, payment of pensions and benefits, taxation, review of decisions and registration of migration agents.

The information form 993i *Safeguarding your personal information*, available from DIMIA offices, gives details of agencies to which your information might be disclosed.

Who can you include in this application?

You can include in this application any family members who will accompany you on your visits to Australia. Family members include spouse and unmarried dependent children.

Paying the Visa Application Charge – Method of Payment

Before you make your payment, contact the Australian Mission to find out what methods of payment can be accepted at that office. If the Australian Mission has advised that you may pay by credit card, complete the payment details on this form. Payment must accompany your application and is generally not refunded if the application is unsuccessful.

Conditions

- You must answer all questions of this form honestly and completely. False or misleading information may lead to refusal or cancellation of your visa, or penalties while in Australia.
- Although your intended business activities may vary from one visit to another, you must NOT engage in any work in Australia that might otherwise be carried out by an Australian citizen or resident. A breach of this may lead to visa cancellation and your removal from Australia.
- If you are granted a **Sponsored Business Visitor**, your visa will include condition **8503 No further stay**. This condition means that the holder of the visa on which the condition is imposed will not, after entering Australia, be entitled to be granted any other visa², while the holder remains in Australia.
- If you are granted a Business (Short Stay) visa, the 8503 – No Further Stay condition may be applied after an assessment of your application.

Authorisation of a person to act and receive communication

You may authorise another person to act on your behalf in connection with your application in dealing with DIMIA. If so, you need to complete form 956 *Authorisation of person to act and receive communication* which is on the last page of this form.

Nominating a person to act on your behalf includes authorising that person to receive communication relating to your application that would otherwise have been sent to you. You will be taken to have received any communication about your application sent to that person as if it were sent to you.

Use of a migration agent

You are not required to use a migration agent to assist you with your application. However, in the event that you wish to use a migration agent, a list of registered migration agents is available from the Migration Agents Registration Authority (MARA) or the offices of DIMIA.

You can contact the MARA at:

PO Box Q1551 QVB NSW 1230 AUSTRALIA

Fax: +61 2 9299 8448

Website: www.themara.com.au

Registered migration agents are bound by the Migration Agents Code of Conduct and generally charge for their services. The MARA investigates complaints against registered migration agents and may take disciplinary action against them. If you have a concern about a registered migration agent, you can contact the MARA.

Under Australian Law, anyone who uses knowledge of migration procedures to offer advice or assistance to a person wishing to obtain a visa to enter or remain in Australia must be registered. If you intend to use a migration agent you are advised to use a registered migration agent.

¹The information provided in relation to health on this form, and the results of tests for Human Immunodeficiency Virus (HIV), will be used for assessing the health criterion of visitor visa applications. A positive HIV **or other** test results will not necessarily lead to a visa being denied but it may mean that your results will be disclosed to the relevant Commonwealth, State and Territory Health Agencies.

²Except in extremely limited circumstances which are outside your control, or to engage Australia's protection obligation under the 1951 UN conventions relating to the status of refugees.

Consent to communicate electronically

DIMIA may use a range of means to communicate with you. However, electronic means such as fax or e-mail will only be used if you indicate your agreement to receiving communication in this way.

To process your application DIMIA may need to communicate with you about sensitive information, for example, health, police checks, financial viability and personal relationships. Electronic communications, unless adequately encrypted, are not secure and may be viewed by others or interfered with. If you agree to DIMIA communicating with you by electronic means, the details you provide will only be used by DIMIA for the purpose for which you have provided them, unless there is a legal obligation or necessity to use them for another purpose, or you have consented to use for another purpose. They will not be added to any mailing list.

The Commonwealth Government accepts no responsibility for the security or integrity of any information sent to DIMIA over the internet or by other electronic means.

If you authorise another person to receive documents on your behalf and they wish to be contacted electronically, their signature is required on the form to indicate their consent to this form of communication.

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Department of Immigration and Multicultural and Indigenous Affairs

Of which countries are you a citizen?

	Are you applying for a:	1		
	Business visitor (Short Stay)			Sponsored Business visitor (Short Stay)
	Please complete all sections of this form. Incomplete applications will delay the processing of your application.	OF	3	Please complete all sections of this form and attach a sponsorship form 1149 completed by your sponsor. Incomplete applications will delay the processing of your application.
	Your details			
	When do you wish to visit Australia?		10	O Current occupation
	From / / to DAY MONTH YEAR TO DAY MONTH YEAR			
2	Do you expect to make more than one entry to Australia in the course this visit? (eg. a side trip to New Zealand) No	of	1	Your current residential address Note: A Post Office box address is not acceptable as a residential address. Failure to give a residential address will result in your application being invalid.
	Yes Provide details	_		
				POSTCODE
3	Give your details as shown in your passport Family name		12	Address for correspondence (If the same as your residential address, write 'AS ABOVE')
	Given names			
4	Sex Male Female			POSTCODE
5	Date of birth Day Month YEAR		13	3 Your contact numbers
•	/ /			Office hours (AREA CODE)
6	Marital status Married Separated Never married			After hours or mobile/cell (AREA CODE)
	Engaged Divorced De facto Widowed		14	Do you agree to DIMIA communicating with you by facsimile, e-mail, or other electronic means?
7	National Identity number (if applicable)			Yes Give details
				Facsimile number (AREA CODE)
8	Passport details			E-mail address
	Passport number			Continued on the next page
	Country			
	DAY MONTH YEAR			
	Expiry date //			
	Make sure your passport is valid for the period of stay you are applying for.			

15	Your employment det Employed Self-employed Name Address Telephone number Position you hold How long have you been employed by this employer/	Give details of employer/business (AREA CODE)	•	o you, or does any member of your family unit included in this application: intend entering an Australian hospital (including nursing homes) for work, training, treatment or visiting? No Yes Please provide full details. If insufficient space, attach an additional statement. intend to work in an Australian preschool-aged child care centre (including preschools and creches) as an employee or trainee? No Please provide full details. If insufficient space, attach an additional statement.
	business?	YEARS MONTHS		
	Business act			
16	Australian business of Contact person Business name (if ap)		•	ave you, or has any member of your family unit included in this application: ever had, or do you currently have, tuberculosis? been in close contact with a person who has, or has had, active tuberculosis? ever had a chest x-ray which showed an abnormality? No Yes Please provide full details. If insufficient space, attach an additional statement.
	Telephone number	(AREA CODE)	-	
17	No _	mployment in Australia? letails of your employment in Australia		
	Occupation Employer's name Contact person Telephone number	(AREA CODE)	yc cc •	uring your proposed stay in Australia, do you, or does any member of our family unit included in this application, expect to incur medical osts, or require treatment or medical follow up for: blood disorders cancer heart disease hepatitis B HIV infection, including AIDS kidney disease, including he australia, do you, or does any member of our family application, expect to incur medical follow up for: liver disease mental illness pregnancy respiratory disease that has required hospital admission any form of surgery
	Health			dialysis No
18	included in this applie	ave you, or has any member of your family unit cation, visited or lived outside your country of usual nan 3 consecutive months?		Yes Please provide full details. If insufficient space, attach an additional statement.

Character

(including those shown in your passport)? Go to Question 26

at Question 24

Five details of accompanying family members

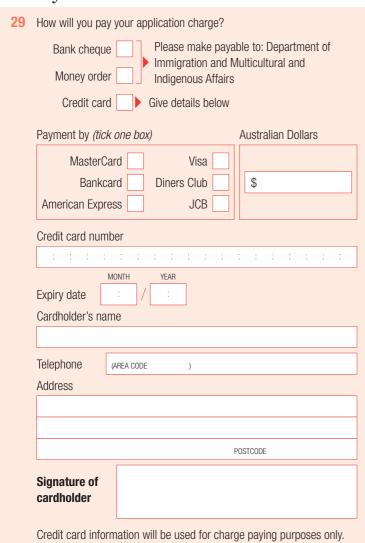
No

Yes

	Gistilaciei	2	Give details of each family member who is included in this application
22	country (including any conviction which is now removed from official records)? • been charged with any offence that is currently awaiting legal action? • been acquitted of any criminal offence or other offence on the grounds of mental illness, insanity or unsoundness of mind? • been removed or deported from any country (including Australia)? • left any country to avoid being removed or deported? • been excluded from or asked to leave any country (including Australia)? • committed, or been involved in the commission of war crimes or crimes against humanity or human rights? • been involved in any activities that would represent a risk to Australian national security? • had any outstanding debts to the Australian No Government or any public authority in Australia? • been involved in any activity, or been convicted of any offence, relating to the illegal movement of people to any country (including Australia)?	/es	(including those shown in your passport, if they are accompanying you) Provide details as shown in the person's passport. Each person must sign the form where indicated below. If the person is too young to sign, the parent or guardian may sign on their behalf. By signing, they are making the same declaration as at Question 27. Accompanying family members 1 Family name Given names Sex Male Female Date of birth Nationality Passport number Passport expiry date Country of birth Relationship Signature of this person Date Male Female Date of birth Nationality Passport number Passport expiry date Country of birth Relationship Signature of this person Day Month Year Passport expiry date Country of birth Relationship Signature of this person Day Month Year Passport expiry date Country of birth Relationship Signature of this person Day Month Year Passport expiry date Country of birth Relationship Signature of this person Day Month Year Passport expiry date Country of birth Relationship Signature of this person
	Accompanying family members		
	Family member includes your spouse and unmarried dependent	t children.	
22	Are there any family members who are to be included in this any	nlication	

3	Family name		Declarations
	Given names Sex Male Female DAY MONTH YEAR	27	 Applicant The information on this form is correct. I have adequate funds to meet all costs associated with my visit to Australia for myself and those included in this application.
	Date of birth Nationality Passport		I will abide by the conditions of the visa.
	number DAY MONTH YEAR		I have never had tuberculosis or any serious condition likely to endanger or be a cost to Australia (otherwise, I attach details).
	Passport expiry date Country of birth Relationship		 I have never been convicted of a crime or any offence in any country; I have not been charged with any offence that is awaiting legal action; I do not have an outstanding debt to the Australian government or any public authority in Australia (otherwise, I attach details).
	Signature of this person DAY MONTH YEAR Date / /		• I understand that the effect of the 8503 visa condition is that it will not be possible for me to apply to remain in Australia beyond the authorised date on my visa label. I agree to having this condition included on any visa issued to me as a result of this application.
	If there are more than 3 accompanying family members, please attach details		• I acknowledge that I understand that if the 8503 visa condition is imposed on my visa, it will be indicated on the visa label by the condition code '8503' and by the short description 'No Further Stay'.
25	Will any of the family members listed in response to Question 24 be in paid employment or undertaking studies while in Australia? No Yes Provide details	28	I acknowledge that this means that the 8503 condition has been imposed on my visa, that I am required to depart Australia on or before the date or time period notified on my visa label and that I understand the restriction that Condition 8503 places on me. I will advise my sponsor (if any) regarding the imposition of the condition to ensure that they understand that such a condition is attached to my visa. Signature of applicant Day MONTH YEAR Date Day MONTH YEAR Date Parent/guardian Where the applicant is under 18 years of age, I am not aware of any reason why the applicant should not travel to Australia (the custody/access rights of another person are not affected).
			Signature of parent/ guardian Date DAY MONTH YEAR / /
26	Do you want to authorise another person to act and receive communication about this application on your behalf? (For further information on authorisation of a person to act and receive information, read the information at the front of this form) No Yes After you have completed the declarations on this page, complete form 956 Authorisation of person to act and receive communication on the last page of this form.		

Payment details



Complete form 956 on the next page if you are authorising another person to act and receive communication on your behalf.



Authorisation of person to act and receive communication

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Department of Immigration and Multicultural and Indigenous Affairs

Authorisation by applicant or sponsor or Business Skills visa holder

I, (Family name)		
(Given names)		
DAY MONTH YEAR		
(Date of birth) / /		
of (current residential address)		
Ur (current residential address)		
POSTCODE		
authorise the following person to act on my behalf in relation to		
(tick one box only) my application or sponsorship OR		
my application or sponsorship 0R		
any correspondence concerning my Business Skills visa		
(eg. monitoring and, where appropriate, cancellation)		
in dealings with the Department of Immigration and Multicultural and		
Indigenous Affairs (DIMIA). This includes authorising DIMIA to send that		
person any communication, documents or notifications relating to my application or sponsorship or Business Skills visa that would otherwise		
have been sent to me.		
le this outherisation made in connection with an eviating application?		
Is this authorisation made in connection with an existing application?		
No		
Yes Give details of your existing application		
Client number or file number or application receipt number		
At which office was that application made?		

Details of authorised person				
Title: Mr Mrs Miss Ms Other				
Family name				
Given names				
Authorised person's postal address				
Authorised person's postal address				
POSTCODE				
COUNTRY CODE AREA CODE NUMBER Telephone number () ()				
7 DIGITO				
Migration Agent Registration Number (if applicable)				
Applicant's signature				
Date/ /				
Consent by authorised person for e-communication				
As the authorised person named on this form, do you agree to DIMIA communicating with you by facsimile, e-mail, or other electronic means? No Yes Five details				
COUNTRY CODE AREA CODE NUMBER Facsimile number () ()				
E-mail address				
Authorised person's signature				
DAY MONTH YEAR				