

PERSONAL DETAILS

Surname		Given Names	
Title eg Mrs, Mr		Known, informal or other name	
Date of Birth		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Intersex
USI: Unique Student Identifier		CHESSN: Commonwealth Higher Education Student Support Number	(Diploma of Nursing Students Only)

Email Address			
Home Telephone		Mobile	
Permanent Street Address			
Postal Address			

Country of Birth		If not born in Australia, what year did you arrive in Australia	
Citizenship Status:	<input type="checkbox"/> Australian Citizen <input type="checkbox"/> New Zealand Citizen	<input type="checkbox"/> Humanitarian Visa <input type="checkbox"/> Permanent Resident	<input type="checkbox"/> Other, please advise:
Are you of Aboriginal or Torres Strait Islander background?	<input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Torres Strait Islander		<input type="checkbox"/> Yes, both <input type="checkbox"/> No
Evidence of Citizenship Status:	(Diploma of Nursing Students Only)		
Main language spoken at home:			
Proficiency in Spoken English	<input type="checkbox"/> Very Well	<input type="checkbox"/> Well	<input type="checkbox"/> Little <input type="checkbox"/> Not at all
Proficiency in Reading/Writing English	<input type="checkbox"/> Very Well	<input type="checkbox"/> Well	<input type="checkbox"/> Little <input type="checkbox"/> Not at all

Next of Kin (in case of emergency)			
Surname		Given Names	
Contact Number		Relationship to you	
Email Address			
Address			

Why would you like to study this course?

Include a short description on how you found out about this course & why you would like to do this.



COURSE DETAILS

Certificate II

CHC22015 CII in Community Services

Certificate III / IV

HLT33115 CIII Health Services Assistance

CHC33015 CIII Individual Support

- Ageing
- Disability
- Home & Community

CHC43115 CIV Disability

CHC43015 CIV Ageing Support

Diploma

HLT51612 Diploma of Nursing (Enrolled/Division 2 Nursing)

Other course name if applicable:

I wrote this enrolment form myself Yes No

I signed, received or was informed of Handbook Course Flyer

Student Signature

Date

FOX ED (received and checked)

signed

Date

Northern Territory Public Sector and Commonwealth Government Employees Only

I declare that this educational training is being undertaken for personal reasons and does not form part of the professional development required for my ongoing employment.

Name: Signed: Dated: / /

PAYMENT DETAILS

ADMINISTRATIVE USE ONLY

Deposit paid: \$ _____ (attach remittance) Other: _____ Payment plan

Purchase order/number and company name:

Electronic Transfer

BSB: 015 883 Account: 4024-69127 Account Name: Fox Endeavours Pty Ltd

Date of deposit:

Bank Cheque (no personal cheques) number:

Date:

Cash

Funding source VFH Private (FFP) U/C VETis SBA PPP Empl Unempl HAAC Other

Other

Notes

For more information on Courses please visit www.fox.edu.au or contact our staff as below

Postal PO Box 41650, Casuarina NT 0810

Office: 08 8927 5995

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TERMS AND CONDITIONS

Educational Standards

We are a locally owned private training organisation, offering optimal sized classes and experienced educators. We strive to maintain administrative practices and policies in support of the highest educational and professional standards in the delivery of vocational education and training services. At delivery we aim to provide a learning environment, which is conducive to quality outcomes for students. We are committed to ensuring you achieve a satisfactory completion with us and guarantee training and assessment services, for your chosen course of study, once you have commenced studying with us.

Refunds

Deposits are non refundable where stated, but a pro-rata credit may apply to complete the course at a later date. A non-refundable deposit is due and payable at time of enrolment acceptance. All invoices are payable within fourteen (14) days of date of invoice.

Fox Education and consultancy DO NOT accept fees in advance and therefore this negates any requirement for a refund.

Enrolment

Enrolment is finalised through lodgement of an enrolment form, terms and conditions, successful completion of an entry interview (which may require an entry assessment) and payment of a non refundable deposit.

Privacy

FOX Education maintains confidentiality of student records in accordance with requirements set down in the 1988 Privacy Act and National Privacy Principles and will only use the information provided for the purpose for which it is provided

1. FOX Education has entered into Agreements with various government departments and agencies which impose obligations on FOX Education to provide certain statistical information about participants and their courses.
2. FOX Education will use its best endeavours to ensure those provided with participants personal information are aware the information is personal and confidential and will not distribute that information to third parties

Permission to use photographic or video images

From enrolment FOX Education may take photographic or video images of participants in training or training-related activities, and use these images to promote or advertise FOX Education and its' activities.

Tick the following box if you do not give permission. I do not give permission

STUDENT AGREEMENT - INDEMNITY

IN CONSIDERATION of the Organiser permitting me to participate in the training course I agree with it as follows:

1. I UNDERSTAND that participating in any type of training or course or activity may be DANGEROUS and I voluntarily ACCEPT the risk of damage consequent upon or arising from my entry as a student, and the use of the Organiser's facilities.
2. I WILL NOT SUE the Organisers for any negligence, tort, breach of contractual or any other legal or equitable rights howsoever caused, and this indemnity will extend to and include any damage arising from my competing in any training and from my use of the Organiser's facilities and I INDEMNIFY the Organisers in respect of the same.
3. I WILL abide by the Rules and Regulations of the Organiser's as to the training and to the use of the Organiser's facilities and the directions of the Organiser's officials including the right to terminate or cancel my training and the use of the Organiser's facilities at any time and for any reason.
4. THE PERSONAL INFORMATION I have supplied to the Organiser regarding my qualifications, experience and any other matter associated with the training is true and correct and I have READ AND UNDERSTOOD all of the clauses of this agreement before accepting the same and before my use of the Organiser's facilities.
5. I give permission for my employer to receive my results if requested and, only, when a contractual agreement is in place for students to attend training in the workplace.
6. I will pay all fees and charges due and understand that should I default Fox Education and Consultancy may engage a debt collection agency at cost to me, to recover outstanding debts. I agree that any legal costs incurred by FOX Education and Consultancy in recovery of any monies due by me shall be recovered in full from me. Transcripts and certifications will be withheld until such debt is cleared.

Participant

I hereby agree to the above Policy and Procedure, and Terms and Conditions of FOX Education and Consultancy

Name: Signed: Dated: / /

Fox Education and Consultancy

Name: Signed: Dated: / /

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