

Student Number

**Please type or print**

For entry into Calendar Year ..... FULL-TIME OR PART-TIME

**1. Name and address**

Name as you wish to appear on your records (**Last**, first, middle)

Former names (if used on previous academic records)

Mailing address Post Code

Permanent address (if different) Post Code

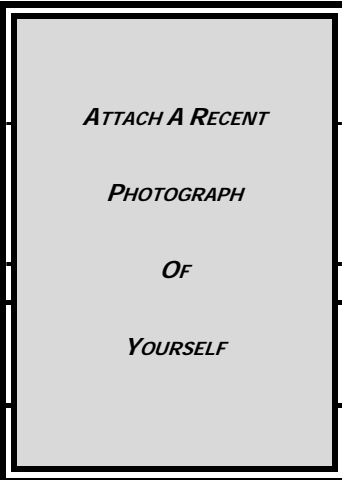
**2. Phone and Email**

Day Evening Email

**3. Emergency Contact**

Name Phone Relationship

Address



**4. Birth date:** **Nationality:**

**5. Area of interest. I am applying for / continuing in**

CERTIFICATE LEVEL 3 (3 – 6 months) \_\_\_\_\_ Please Indicate Academic Year of Study 1, 2, 3, 4, or 5

CERTIFICATE LEVEL 4 (6 months – 12 months) \_\_\_\_\_

DIPLOMA (2 – 3 years) \_\_\_\_\_ \*

ADVANCED DIPLOMA OF (3 – 4 years) \_\_\_\_\_ \*

ADVANCED DIPLOMA OF APPLIED SCIENCE (3 – 4 years) \_\_\_\_\_ \*

ADVANCED DIPLOMA OF APPLIED SCIENCE (HONOURS) (3 – 4 years) \_\_\_\_\_ \*

RESEARCH/ POST GRADUATE STUDIES \_\_\_\_\_

SINGLE SUBJECTS / OTHER \_\_\_\_\_

- \* *Please indicate here if you are enrolling in a conversion course, For example the Conversion Course For Nurses.*
- \*\* *Please indicate here if you wish to vary the stated time for completion, For example those wishing to complete the Advanced Diploma in 3 Years*
- ☛ *For Diploma, Advanced Diploma or Honours courses please indicate if you are completing Double Diplomas*

**6. Citizenship**

Australian Resident                      Yes      No                      Country of Citizenship:

Type of visa (if not Australian citizen):

**7. Individual Learning Needs**

Yes      No      If Yes, please describe

**8. Health care experience**

9. Have you ever been convicted of a criminal offence    Yes    No            If yes, please attach statement of on a separate sheet

**10. Educational experience**

List all colleges/universities in order of attendance (no exceptions). If still enrolled, indicate leaving date. If more than four, please attach separate sheet.

	Institution	City	State	Dates Attended	Degree	Major	Year
1	.....						
2	.....						
3	.....						
4	.....						

**11. Previous Trade, Profession, Work Skills or Experience**

**12. Referees – At least one Australian Citizen who can verify your photograph**

1.	..... Name	..... Occupation/Relationship	..... Phone
2.	..... Name	..... Occupation/Relationship	..... Phone

13. If you have previously applied to this institution, please list : Year \_\_\_\_ Diploma / Certificate:

How did you hear about us:

If you have consulted a member of the College staff or faculty regarding your admission, please list contact names here:

Please list other colleges / institutions to which you are applying at this time:

**14. Skills Recognition - Application for Recognition of Prior learning (RPL) / Recognition of Current Competencies (RCC)**  
*Use this page only if you are applying for recognition of study or work you have previously done that relates to the course you are applying for.*

**PART B**

**MODULES CLAIMED**

**Module / Competency for which you are applying for Recognition of Prior Learning / Current Competencies (One per form):**

Please Note: An appointment is required with an RPL / RCC Assessor for all students not currently enrolled in the subject for which RPL / RCC is being sought.

\*Are you Fully Financial or on a Deferred Payment Schedule \*Please delete whichever NOT applicable

\$60.00 Application Fee Paid Date Receipt No

**PART C**

**EXPERIENCE GAINED**

**WORK EXPERIENCE THAT MAY RELATE TO THE LEARNING OUTCOMES OF THE COURSE – PRESENT WORK**

Present Employer

Current Position

Duties

Present Employer

Current Position

Duties

**WORK EXPERIENCE THAT MAY RELATE TO THE LEARNING OUTCOMES OF THE COURSE – PAST WORK**

Employer

Position

Duties

Employer

Position

Duties

Employer

Position

Duties

Employer

Position

Duties

**LIFE EXPERIENCES THAT MAY RELATE TO THE LEARNING OUTCOMES OF THE COURSE**

Outline any other activities that you have done that may give you skills and knowledge which may be relevant to the course. You can attach more pages if needed.

<b>PART D</b>	<b>EDUCATION GAINED</b>
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**EDUCATION THAT MAY RELATE TO THE LEARNING OUTCOMES OF THE COURSE**

EDUCATION AND TRAINING	INSTITUTION	COURSE	YEAR/S

If you started tertiary education but did not complete it, please include the following details: How much of your course did you complete? Which subjects did you complete? Why did you leave?

In addition to completing this application, it is also possible that you may be required to undertake a challenge examination in order for us to assess your level of competence.

You should focus on the last five to ten years of your career / life. Recognition of prior learning may NOT be granted for experience / awards gained more than ten years ago.

If evidence collected for one module also relates to another, you can refer back to it rather than copying it again. If the assessor does not sight the original document, you will need to have copies certified.

If you feel that you should be awarded more RPL / RCC than has been granted, please contact one of our RPL / RCC assessors who can outline the appeals process for you.

Student Signature	Date Submitted
Office Use Only	Received
DENIED / FULLY APPROVED / PARTIALLY APPROVED / APPOINTMENT REQUIRED PRIOR TO APPROVAL / CONDITIONS ON APPROVAL	
Date	Student Signature on Acceptance of RPL/RCC
Date	Principal Signature on Acceptance of RPL/RCC
If denied, reasons and appeal process, OR details of conditions on approval	

**15. Fees**

**15.(a) Administration Fee**

Administration fee (A) \$ .....

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**15.(b) Tuition Fee**

Tuition Year(s) \_\_\_\_\_ \$ .....

**Fees Due** (B) \$ .....

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Details :

**15.(c) Deferred Payment Schedule Tuition Fees**

Balance of fees from past Semesters \$ .....

Term 1 (Date Due.....) \$ .....

Term 2 Date Due.....) \$ .....

Term 3 Date Due.....) \$ .....

Term 4 Date Due.....) \$ .....

**(Attach schedule of proposed payment)**

**Fees Due** (C) \$ .....

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Details :

**15.(d) Single Subject Fees**

Single subject \_\_\_\_\_ \$ .....

Single subject \_\_\_\_\_ \$ .....

Single subject \_\_\_\_\_ \$ .....

Single subject \_\_\_\_\_ \$ .....

Single subject \_\_\_\_\_ \$ .....

Single subject \_\_\_\_\_ \$ .....

Single subject \_\_\_\_\_ \$ .....

Single subject \_\_\_\_\_ \$ .....

Total Single subjects \$ .....

Administration fee \$ 45 per subject \$ .....

**Fees Due** (D) \$ .....

Details :

**Total Fees Due (A + B or C + D) \$ .....**

**16. Declaration**

I declare that the information in this application is true and correct and that any deliberate misstatement is grounds for dismissal from the College. I have paid or contracted to pay the prescribed fees as set out in the Fee Schedule for the above course subjects.

I understand that all monies paid to the College are non-refundable after ten days from signing this declaration or upon receipt of learning materials if this is prior to ten days.

I agree to abide by the Regulations of the College as outlined in the College Policy Folder and Administrative Procedures posted on the College notice board from time to time.

\_\_\_\_\_  
Signature (Student)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Parent / Guardian\*)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature(Principal/Deputy/Administrator)

\_\_\_\_\_  
Date

\* Where Student is under 18, parent or guardian must certify that they have explained the terms and conditions of this contract to the student.

S.A. College of Natural Medicine is committed to the policy that all persons shall have equal access to programs and facilities without regard to age, creed, marital or parental status, race, nationality or ethnic origin, physical handicap, religion, sexual preference or gender.

I would like an official statement of enrolment                      Yes / No

I will be applying / have applied for AUSTUDY                      Yes / No

In accordance with the privacy Act 1988 – 2000, I am willing for my telephone number / contact details to be given to external government agencies\*                      Yes / No

\* In the case of a legal obligation for the College to disclose personal information to DFEEST or other Government Agency I understand that the College will endeavour to inform me prior to this information being released.

I enclose \$ ..... (cash/cheque/money order)

Please debit my **BANKCARD\*** / **MASTERCARD\*** / **VISA\*** Expiry Date Month \_\_\_\_Year

\*delete whichever does not apply

Credit Card Number																			
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Name \_\_\_\_\_

Address \_\_\_\_\_

Signature \_\_\_\_\_

**ENROLMENT CONTRACT – MIXED MODE STUDENTS**

- 1 I, \_\_\_\_\_ am enrolling in the above college and I understand and acknowledge that:
- 2 It is the Student's responsibility to read the College Policy Folder and have a thorough understanding of the College rules and procedures, as outlined in the Prospectus and the Policy Folder.
- 3 The final date for enrolment in any year is the 31st of December of the preceding year for on-Campus Studies. Late enrolments and mid-year enrolments may be accepted at the Principal's discretion. For flexible learning, enrolment may be at any time.
- 4 The enrolment/administration fee as prescribed by the current year fee schedule is payable on enrolment each year. This fee covers a calendar year from the month paid.
- 5 All fees paid to the College are not transferable to any other person.
- 6 All fees paid to the College, for subjects covered by this application form, may not be transferred to other subjects after commencement of the course.
- 7 All fees are non-refundable after ten days from the date of this enrolment contract, except where classes start or learning materials are supplied before the end of the ten day period. Enrolments are limited in numbers to ensure high standards and in accepting a student's enrolment, in the event of their non-attendance, another student may have missed out on a placing. Students are expected to be aware of their work and personal commitments before they enrol.
- 8 In the event that a student withdraws from a course due to exceptional circumstances, fees will be charged for subjects commenced at a single subject fee rate. Students are expected to be aware of their work and personal commitments before enrolling and it will be necessary to establish that the cause of withdrawal could not be foreseen prior to enrolment. Refunds for balance of fees after single subject fees have been calculated will not be granted automatically. Exceptional circumstances may include inability to gain a student visa (for overseas students), sudden onset of life-threatening illness, and death of the student. For all other exceptional circumstances, a deferment of studies will be granted.
- 9 All fees paid to the College are credited to the student for completion of the course or courses in which the student is enrolled. Contracted studies may be deferred for 12 months, or on compassionate or medical grounds this can be increased to a maximum of twenty-four months. After this period original monies are taken into consideration, but the latest published fee schedule must be paid and the student must re-apply for admission. Fees being paid must be completely up to date before a deferral can be given. The student must state, in writing, the reason(s) for requesting deferment. In no case will more than one deferment be granted.
- 10 SA College of Natural Medicine is committed to the policy that all persons shall have equal access to programs and facilities without regard to age, creed, marital or parental status, race, nationality or ethnic origin, physical handicap, religion, sexual preference or gender.
- 11 The College has the right to use student photographs, testimonials and assignments and research & tutorial questions with due acknowledgement given to the student where possible.
- 12 The College Board reserves the right to make changes to the lecturer, course outline, course times, policies, costs, and any other provisions as, and when this becomes necessary.
- 13 The College reserves the right to cancel or postpone any course should there be insufficient enrolments. All students enrolled will be notified and fees paid will be refunded or credited towards a subsequent or alternative course (student's choice).
- 14 It is College policy to withhold the issuance of Qualifications, Statement of Attainments and formal notification of assessment results until all fees are paid and all assessment tasks have been successfully completed.
- 15 I have read the above, and have duly familiarised myself with the College rules and procedures in the Prospectus, the Policy folder, the current fee schedule, weekly timetable, and year's calendar events.
- 16 I have read and I accept all the conditions as listed above.

\_\_\_\_\_  
Signature (Student)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Parent / Guardian\*)

\_\_\_\_\_  
Signature (Witness)

\_\_\_\_\_  
Signature(Principal/Enrolment Officer)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature(Witness)

\* Where Student is under 18, a parent or guardian must certify that they have explained the terms and conditions of this contract to the student.