

ENROLMENT FORM

Please print all details in **BLOCK LETTERS**

Applicant Details

Date	/ / 2008	Date of birth	/ /
Surname			
Given name/s			
Address			
Phone (home)		Mobile phone	
Email			
Will you need extra assistance with numeracy or literacy skills?			YES <input type="checkbox"/> NO <input type="checkbox"/>
Will you be applying for RPL (recognition of prior learning)?			YES <input type="checkbox"/> NO <input type="checkbox"/>

Intended Course Enrolment Details

Certificate II in Asset Maintenance (Cleaning Operations)	<input type="checkbox"/>
Certificate III in Asset Maintenance (Cleaning Operations)	<input type="checkbox"/>

Referral Details

Have you been referred by an employment service provider (ESP) or employer?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If Yes, Please provide contact details		
Name of ESP/Employer		
Contact person		
Address		
Phone		Mobile <input type="checkbox"/>
Fax		Email <input type="checkbox"/>

Declaration: I declare all information given on this form is true and correct. Parent/Guardian will also need to fill the following information and sign if the student is under 18 years old.

Full Name:	Student Signature:
Parent/Guardian Name:	Parent/Guardian Signature:
Relationship to student:	Contact Phone Number: