

Enrolment Application



ELA BEACH CORONATION COLLEGE MT HAGEN KIMBE

COURSE DETAILS

Course Code: Course Title:

Anticipated start date: Australian Qualification Required: [YES/NO]

STUDENT DETAILS

Family Name: Given Name:

(Please Note: The name used on this enrolment form WILL be the name that is used on the student's final certificate/transcript)

Date of Birth: (DMY) Sex: [Female/Male]

Nationality: Language Spoken at Home:

Country of Birth: Religion:

Occupation: Employer:

Residential Address:

Home Phone: Home Fax:

Home E-mail: Other No.:

SPONSOR'S DETAILS

Payer's Details (if different from above)

Company Sponsor:

Contact Person: Position:

Office Location: Postal Address:

Phone: Fax:

E-mail: Other No.:

Emergency Contact Details

Name:

Address:

Day Phone: Day Fax:

E-mail: Other No.:

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MEDICAL DETAILS

Preferred Doctor: Location:

Work Phone: Mobile Phone:

By signing this enrolment form, I accept that in the absence of the preferred doctor, TAFE will seek medical assistance from any other doctor in an emergency. Indicate any medical problems that the school should be aware of: (If none, write NONE.)

NB. IEA does not provide comprehensive Personal Accident Insurance cover for students. In the case of significant medical costs, such as medivac, students need to be covered by insurance policies taken out by their family or company.

ACADEMIC HISTORY

Highest Levels of Education Completed

School: Years at the school: Grade:

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WORK HISTORY

Briefly describe any work experience you have (attach extra paper if necessary)

ENROLMENT DETAILS

Payment Details: Payment Rate: Annual Fees Periodic Payments

N.B Sponsors are responsible for the payment of fees irrespective of any arrangement with an employer, including the government

All fee payments are to be made payable to the **IEA COLLEGE OF TAFE.**

Attachments

- | | | |
|---|----------------------|--|
| 1. <input type="checkbox"/> Enrolment Bond | K100.00 | 3. <input type="checkbox"/> A passport sized photo (new student) |
| 2. <input type="checkbox"/> Fees in advance | <input type="text"/> | 4. <input type="checkbox"/> Copy of passport & visa (new expatriate student) |
| Total | <input type="text"/> | |

Agreement

- I have read and understand the Conditions Relating to Charges and the Code of Conduct.
- I understand that this enrolment is valid for one academic year only and the school reserves the right to refuse re-enrolment next year if the student's attitude or behaviour is unsatisfactory during this year.
- I consent to being a member of the relevant School Association Inc.

Sponsor's Signature: Date:

Student's Signature: Date:

ACCEPTANCE OF ENROLMENT

Office Use Only

Commencement Date: Course:

[] All documents received

[] All outstanding monies cleared from other IEA Schools

Payment Received: K Date: Enrolment Accepted Date: