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Enrolment Information	
Course Name	

Student Information					
Surname/Family Name		First Names			
Date of Birth		Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Address					
Job Title					
Organisation/Employer					
Email Address					
Work Phone		Mobile		Home	
Student Identification Sighted by Lennox Representative:					
Name of Representative: _____		Signature of Representative _____			
Driver's License Number _____		Birth Certificate _____		Passport Number _____	

Current Employment Status		
<input type="checkbox"/> Full time employee	<input type="checkbox"/> Part time employee	<input type="checkbox"/> Self employed
<input type="checkbox"/> Employer	<input type="checkbox"/> Unemployed	<input type="checkbox"/> Other

Language	
In which country were you born?	
Australian Citizen/Permanent Resident?	<input type="checkbox"/> No <input type="checkbox"/> Yes
Do you speak a language other than English at home?	<input type="checkbox"/> No, English Only
	<input type="checkbox"/> Yes, I also speak _____
If Yes, how well do you speak English?	<input type="checkbox"/> Very Well <input type="checkbox"/> Well <input type="checkbox"/> Not well

Aboriginality	
Are you of Aboriginal or Torres Strait Origin?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Torres Strait Islander

Disability	
Do you consider yourself to have a disability, impairment or long term medical condition?	<input type="checkbox"/> No <input type="checkbox"/> Yes
If Yes, Please indicate the areas of disability, impairment or long term medical condition:	
<input type="checkbox"/> Hearing Impairment	<input type="checkbox"/> Physical Impairment <input type="checkbox"/> Intellectual Impairment
<input type="checkbox"/> Vision Impairment	<input type="checkbox"/> Acute Medical Condition <input type="checkbox"/> Other
Please provide brief details:	

Education and Training					
What is your highest completed school level	<input type="checkbox"/> Year 8 or below	<input type="checkbox"/> Year 9	<input type="checkbox"/> Year 10	<input type="checkbox"/> Year 11	<input type="checkbox"/> Year 12
Since leaving school have you completed a qualification?	<input type="checkbox"/> No		<input type="checkbox"/> Yes		
If yes, please indicate which level of qualification:	<input type="checkbox"/> Certificate I	<input type="checkbox"/> Certificate II	<input type="checkbox"/> Certificate III	<input type="checkbox"/> Certificate IV	
	<input type="checkbox"/> Diploma	<input type="checkbox"/> Adv Diploma	<input type="checkbox"/> Bachelor or Higher Degree		

Course Fees	
Covered by Employer	<input type="checkbox"/> Covered by Student <input type="checkbox"/>

Privacy Statement
The information supplied on this form is needed by Lennox Institute to manage your registration and course participation. No personal information will be disclosed outside Lennox Institute without your express consent, except where required by law.

Registration Information, Terms and Conditions
<p>ENROLMENT: All Students attend an induction session at the time of enrolment. All policies and the Student Handbook are shown and explained during the student induction and a checklist completed to verify their attendance and participation in the session. The method of payment of fees and the refund policy is explained during the induction session.</p> <p>Change of address and contact details During the period of enrolment students are obliged to keep contact details up to date. Students must inform us of any change of address details as soon as possible.</p> <p>Complaints and Appeals Students are entitled to access the Complaints and Appeals process should they be dissatisfied about the course or RTO decisions. This information is available in the Student Handbook and the website. Students should also be aware that this agreement, and the availability of complaints and appeals processes, does not remove the right of the student to take action under Australia’s consumer protection law.</p>

STUDENT DECLARATION

I (student name) _____ am aware of the extent of the course fees associated with studying in the course with Lennox Institute and I am prepared to meet these costs (where relevant).

I have attended an induction session and have had the policies and procedures including the refund policy explained to me, I understand and agree to abide by the RTO policies, the terms and conditions of enrolment.

I understand that if I provide incorrect or incomplete information, this may result in cancellation of my enrolment. I recognise that it is my responsibility to provide all necessary documentation to support this application.

I authorise Lennox Institute to obtain further information where necessary. I understand that I am obliged to notify the RTO of any change of contact details and address while I am enrolled in the course. Please sign here to accept the offer of a place in a course and the conditions of your enrolment.

Signed _____ Date _____