



inspire education

"LAST CHANCE SALE"

Diploma of Work Health & Safety Student Enrolment Form

Application Date: Male Female Country of Birth: Date of Birth:

First Name/s: Last Name:

Address:

Suburb: State: Postcode:

Postal Address:

Suburb: State: Postcode:

Email: Secondary Phone: Primary Phone:

Are you Aboriginal and/or Torres Strait Islander? Aboriginal Torres Strait Islander No

Main Language Spoken at Home:

If not English, how well do you speak English? Very Well Well Not Well Not at All

Course Details: Course Name: Diploma of Work Health and Safety Course Start Date:

Course Duration: Twelve [12] months Delivery Mode: Distance Learning I would like to apply for Recognition of Prior Learning (RPL)

Entry Pathway: *(please select the option which BEST describes your prior experience)*

All Required Prerequisite units Cert IV OHS - Gap Training Required No Prior Qualifications - Pre-Requisite Training Required

Additional Info: *(please answer all questions)*

Employment Status: Full-Time Part-Time Employer Seeking Full-Time Work Seeking Part-Time Work
 Self Employed Unpaid Worker in Family Business Unemployed: Not Seeking Work

Are you still attending Secondary School? Yes No What is your highest Completed School Level? e.g. Yr 10
In which year did you complete that level? e.g. 2001

Have you successfully completed any of the following qualifications? *(please select all that apply)*

Certificate I Certificate II Certificate III (or Trade Cert) Certificate IV (or Advanced Cert)
 Diploma Advanced Diploma or Associate Degree Bachelor Degree or Higher Other

Do you have access to a computer with internet? Yes No

I understand that I will receive my results and student correspondence online

How do you rate your computer skills? Poor Basic Good Excellent

How do you rate your ability to work with numbers? Poor Basic Good Excellent

Do you live with any physical/mental disability that may affect your participation in the course?

No Disability Hearing Physical Intellectual Learning Mental Illness Brain Impairment Vision Medical Condition
 Other (specify) Do you need any additional support? Yes (specify) No

Applicant Declaration:

I have reviewed the policies and procedures associated with my enrolment in the student handbook here >>> http://www.inspireeducation.net.au/documents/Student_Handbook.pdf and understand these terms of my enrolment with Inspire Education.

I would like to apply for enrolment in the above vocational training course with Inspire Education Pty Ltd (RTO # 32067). For this distance-learning course enrolment, provided I give written notice within thirty (30) days from the date of this application, and provided I return all materials unmarked and unused (where applicable) within seven (7) days of such notice, I will be entitled to a refund of the total course fees less 25% of the full course fee to cover administration costs. If I wish to change my enrolment to a different course offered by Inspire, I understand that I will incur a \$250 transfer fee PLUS the difference between my original course fee paid and the full fee (not promotional pricing) of the new course I am transferring to (where applicable). I understand that if I fail to give the required written notice and do not wish to transfer to another course with Inspire I am liable for the full course fee.

I have read and understand Inspire Education's Privacy Policy, which can be viewed here >>> <http://www.inspireeducation.net.au/privacy-policy/>

Full Name:

Date:

Signed:

Office Use Only: Student No: Enrolment No:

Entered Client Access Granted
 Created Invoice Enrolment Form Uploaded
 Payment Received Entered in SafetyLine
Course Advisor:

Student Name:

Of the following categories, which BEST describes your main reason for undertaking this course?

- To get a job
- To try for a different career
- I wanted extra skills for my job
- Other
- To develop my existing business
- To get a better job or promotion
- To get into another course of study
- To start my own business
- It was a requirement of my job
- For personal interest or self-development

Payment Details:

Preferred Payment Method (please TICK ONE):

- Credit/Debit Card
- Direct Debit >> MUST Complete This Form >> <http://www.inspireeducation.net.au/documents/direct-debit-request-form.pdf>
- Electronic Funds Transfer (EFT) >>
- Bank or Personal Cheque

Account Name: Inspire Education Pty Ltd
Bank: Bank of Queensland
BSB: 124-001 **Account No:** 208 441 10
Reference: Your Full Name (this is a MUST so we can identify your particular payment)

FLEXIBLE Payment Plans (please TICK ONE):

- Option 1: **Has current Cert IV WHS (BSB41412)** Just one upfront payment of \$1790!
'LAST CHANCE SALE' - Only \$1490! Hurry! Ends 20th December
- Has current Cert IV OHS (BSB41407)** - Just one upfront payment of \$1790 \$1490 + \$200 Gap training (\$1690 total)
- No Prior Qualifications** - Just one upfront payment of \$1790 \$1490 + \$400 Pre Req training (\$1890 total)
- Option 2: Three Monthly Payments of \$866.67 (Total \$2600)
(CREDIT CARD OR DIRECT DEBIT ONLY) Please nominate date for second payment / / 2014
- Option 3: Fees are paid in full \$500 Deposit + 6 Monthly Payments of \$375 (Total \$2750)
(CREDIT CARD OR DIRECT DEBIT ONLY) Please nominate date for second (and subsequent) monthly payments / / 2014

Terms and Conditions: ^ Sale price is valid from December 13th until December 20th 2013 unless extended and cannot be used in conjunction with any other offer. ^Possible savings are when the special upfront price is compared to the longest payment plan that Inspire Education offers on this course. Full upfront payment must be received by December 20th 2013 to be eligible for sale price. Standard Pricing valid until 31st December 2013, unless extended. Full first payment must have been received by 31st December 2013 to guarantee pricing unless otherwise arranged and confirmed in writing.

Credit Card Authorisation:

I, authorise Inspire Education to debit \$ upfront; and
\$ x months (if payment plan selected above) from the following credit card for the purpose of enrolling into training. For both upfront payments and payment plan amounts, please debit my card as per the selected payment option above according to the following details:

Card Type (please TICK ONE): Visa Mastercard

Card Number: **Expiry:** /

Card Holders Name:

Signature:

Invoice Details (for companies ONLY):

Contact Name:

Business Name: **ABN:**

Address:

Suburb: **State:** **Postcode:**

Contact Email:

Business Phone: **Fax:**

Once this form is completed, please return to Inspire Education:

Email: enrolments@inspireeducation.net.au; **Fax:** 1800 008 128;
Post: GPO Box 1180, Brisbane, QLD 4001