Short Course Application and Enrolment Form

BOX HILL INSTITUTE **CAE**

Passive House
Preparatory Maths & Physics For Passive House Designers

COMPLETE AND EMAIL TO: passivehouseenquiries@boxhill.edu.au

Have you ever enrolled at Box Hill Institute before?   Y ☐   N ☐

Box Hill Student ID No. _____

Surname (Family name): _____

BH Phone: _____   AH Phone: _____

Given Names: _____

Email: _____

Date of Birth: _____   Male ☐ Female ☐ Other ☐

Unique Student Identifier (USI) No. (if known) _____

Local Address: _____

If USI No not known: Licence No: _____   State: _____
(We will apply for one on your behalf if relevant to course.)

Suburb/Town: _____   Postcode: _____

What is your highest completed school level?
(Please tick)
☐ Completed Yr 12..............................12
☐ Completed Yr 11..............................11
☐ Completed Yr 10..............................10
☐ Completed Yr 9 or equivalent..............09
☐ Completed Yr 8 or equivalent..............08
☐ Did not attend school.......................02

In which year did you complete that school level?
☐☐☐☐

Are you still attending secondary school?
Y ☐   N ☐

Have you successfully completed any of the following qualifications? (Please tick)
Y ☐   N ☐
A E I
☐ Bachelor Degree or Higher Degree ....1 ☐☐☐
☐ Advanced Diploma or Associate Degree ....2 ☐☐☐
☐ Diploma (or Associate Diploma) ....3 ☐☐☐
☐ Certificate IV (or Advanced Cert/Technician)....4 ☐☐☐
☐ Certificate III (or Trade Certificate) ....5 ☐☐☐
☐ Certificate II ....6 ☐☐☐
☐ Certificate I ....7 ☐☐☐
☐ Certificates other than the above ....8 ☐☐☐

A - Australian
E - Australian Equivalent
I - International

Institution Name _____   Year completed ☐☐☐☐
(Most recent institution)

Of the following categories, which BEST describes your current employment status?
☐ Full-time employee...1
☐ Part-time employee...2
☐ Self employed - not employing others..............3
☐ Employer 4
☐ Employed - unpaid worker in family business..5
☐ Unemployed - seeking full-time work 6
☐ Unemployed - seeking part-time work 7
☐ Not employed - not seeking employment 8

(Please tick)

Which of the following BEST describes your current or recent occupation? (Please tick)
☐ Managers..1
☐ Professionals..2
☐ Technicians and Trade Workers........................3
☐ Community and Personal Service Workers 4
☐ Clerical and Administrative Workers 5
☐ Sales Workers 6
☐ Machinery Operators and Drivers 7
☐ Labourers 8
☐ Other...9

Which of the following BEST describes the industry of your current or previous employer?
(Please tick)
☐ Agriculture, Forestry and Fishing......................A
☐ Mining...B
☐ Manufacturing C
☐ Electricity, Gas, Water and Waste Services .....D
☐ Construction...E
☐ Wholesale Trade..F
☐ Retail Trade..G
☐ Accommodation and Food Services ....H
☐ Transport, Postal and Warehousing I
☐ Information Media and Telecommunications....J
☐ Financial and Insurance Services.....................K
☐ Rental, Hiring and Real Estate Services............L
☐ Professional, Scientific and Technical Services...M
☐ Administrative and Support Services................N
☐ Public Administration and Safety ....O
☐ Education and Training ....P
☐ Health Care and Social Assistance ....Q
☐ Arts and Recreation Services ....R
☐ Other Services..S

Do you consider yourself to have a disability, impairment or long-term condition? (Please tick)
☐ Hearing/Deaf 11
☐ Physical 12
☐ Intellectual 13
☐ Learning...14
☐ Mental Illness..15
☐ Acquired Brain Impairment...............................16
☐ Vision 17
☐ Medical Condition...18
☐ Other..19
☐ Unspecified 99

Are you of Aboriginal or Torres Strait Islander origin? (Please tick)
☐ No ....N
☐ Yes, Aboriginal..A
☐ Yes, Torres Strait Islander ....T
☐ Yes, Aboriginal AND Torres Strait Islander.......B

In which country were you born? (Please tick)
Australia ☐   Other ☐ (please specify)
_____

If other, YEAR you arrived in Australia _____
In which town were you born?
_____

How well do you speak English? (Please tick)
☐ Very well..1
☐ Well 2
☐ Not well..3
☐ Not at all 4

Course Name   **PASSIVE HOUSE – PREPARATORY MATHS & PHYSICS FOR PASSIVE HOUSE DESIGNERS**

Course ID   **CPH02 - 2017 - BES**   Group _____   Start Date **23/05/17**   Fee $ **$450**

Concessions (if applicable)   No ☑   Yes ☐ (Complete details below)   Card Number _____   Expiry Date _____

Health Care Card ☐   Seniors Card ☐   Pension Card ☐   (Please enclose a copy of Concession documentation)

Payment Details - Enrolments cannot be accepted without payment
Mail Enrolment Payment Details: Cash ☐   Cheque ☐ (Payable to Box Hill Institute)   Moneyorder ☐   Visa ☐   Mastercard ☐   Cardholder's Name _____

Card Number _____   Expiry Date _____   CCV _____   Cardholder's Signature _____

Or Invoice Company – Minimum Amount $500 and Authorisation letter or Purchase Order required - please attach.

Company Name _____   Contact _____   Phone _____

Address _____   Suburb _____   Postcode _____

All enrolments will receive a confirmation letter giving details of the venue and car parking, if available.

Condition of Enrolment (Short Courses) By enrolling in this Short Course at Box Hill Institute, you are agreeing to abide by the policies, procedures, regulations and Student Code of Conduct of the Institute. This includes agreement with the refund policy stated below, and agreement to your personal information being disclosed in accordance with Box Hill Institute's Privacy Collection Statement, viewable at www.boxhill.edu.au/privacy. You are also providing confirmation that the information you have provided to enrol above, is complete and correct. Further application and enrolment information is viewable at www.boxhill.edu.au

Refund Policy (Short Courses)
Course Withdrawal and Refunds: Fee refunds will only be issued if a course withdrawal request is received at least four (4) working days prior to the date of course commencement. A $55 administration fee will be charged. No refunds will be issued for withdrawal requests received after this time.

Course Transfers: Students wishing to transfer to a future start date of the same course will be accepted if a request is received at least four (4) working days prior to the date of course commencement, and providing a suitable future course offering is available.
Course Cancellation by the Institute: Box Hill Institute reserves the right to cancel a scheduled course. In the event of a cancellation, students will be notified two days before the scheduled start date. Classes are subject to sufficient enrolment numbers. Box Hill Institute makes every effort to ensure that information is correct at the time of publication, but reserves the right to change or postpone courses, and to alter schedules, locations, fees and teachers due to unforseen circumstances. Where a course is cancelled by the Institute, a full refund will be issued. Processing of all withdrawal and course cancellation refunds takes a minimum of fifteen (15) working days. Refunds will be made directly to the payee, and will be mailed to the payee's address as shown on the application form.
Unique Student Identifier (USI): All students undertaking accredited VET training will be required to have a USI (Federal requirement).