

# COURSE ENROLMENT FORM



FORM: 021A (b)

## SRO20106 Certificate II in Sport and Recreation

PERSONAL DETAILS

*Please use BLOCK letters and print details in full.*

TITLE:	FAMILY NAME:	
GIVEN NAME/S:		
DATE OF BIRTH:	MALE/FEMALE:	
ADDRESS:		
SUBURB:	STATE:	POST CODE:
TELEPHONE - HOME:	WORK:	
MOBILE:	FAX:	
EMAIL:		
EMERGENCY CONTACT DETAILS: (NAME AND TELEPHONE)		
EMPLOYER:		
EMPLOYER ADDRESS:		
SUBURB:	STATE:	POST CODE:
EMPLOYER CONTACT: TELEPHONE:	FAX:	

EEO TARGET GROUP / SPECIAL ASSISTANCE (OPTIONAL) PLEASE CIRCLE

WOMEN	- YES	
NO		
AUSTRALIAN ABORIGINAL OR TORRES STRAIT ISLANDER ORIGIN	- YES	NO
PERSON WITH A PERMANENT DISABILITY	- YES	NO
<u>IF YES</u> , DO YOU REQUIRE ANY SPECIAL ASSISTANCE (PLEASE SPECIFY):		
A PERSON FROM A NON-ENGLISH SPEAKING BACKGROUND	- YES	NO
<u>IF YES</u> , IS ENGLISH YOUR FIRST LANGUAGE	- YES	NO
IF NO, IS YOUR ENGLISH EASILY UNDERSTOOD BY OTHERS?	- YES	NO
IF NO, ARE YOU INTERESTED IN ASSISTANCE TO SPEAK ENGLISH	- YES	NO

**PLEASE TURN OVER**

RECOGNITION OF PRIOR LEARNING

**PLEASE CIRCLE**

ARE YOU ELIGIBLE FOR RECOGNITION OF PRIOR LEARNING (RPL)? (PLEASE READ OUR RPL BROCHURE OR SEEK ASSISTANCE FROM AN INSTRUCTOR)	- YES    NO
DO YOU WANT ASSISTANCE IN ASSESSING YOUR ELIGIBILITY FOR RPL?	- YES    NO
HAVE YOU MADE APPLICATION FOR RPL?	- YES    NO

OTHER INFORMATION/ASSISTANCE REQUIRED


STUDENT DECLARATION

**(Please read carefully before signing)**

- Applications made by students under the age of 18 years must be signed by a parent/guardian.
- I hereby certify that the particulars herein are correct and I agree to abide by ACE Tennis Academy policy and procedures and acknowledge that the facilities made available for my use will be used only in accordance with the principles of proper use and in compliance with any relevant operating standards.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature : \_\_\_\_\_ Date: \_\_\_\_\_  
(If applicable)

**OFFICE USE ONLY**

Application Received: _____	Course Co-ordinator: _____
Special Requirements: _____	_____
_____	Course Date: _____
RPL: _____	_____
Fee Payment Details: _____	Course Location: _____
_____	_____