



ENROLMENT FOR ACT AWARDS

20 Hayman Road, Bentley WA 6102 Australia | P: 08 6313 6200 F: 08 6313 6299| CRICOS № 02558A



Semester: Year Are you intending to complete your course this year? Yes No ACT #:

Title: Given Name(s): Family Name:.....

Semester Postal Address: Postcode:

Contact details permanent (if different):

Phone (home): Mobile: Email:

Course (please tick box): BCS BMin BTh AsscDegTh Hons MDiv GradDipDiv CombMDiv/GDDiv
GradDipCS MA(Min) MA(Th) GradDipMin Audit Selected units only

UNIT CODE:	UNIT TITLE	OFFICE USE ONLY

Project Title: Supervisor:

Reminder: Faculty/Academic Dean are available to discuss selection of units (book appointments through the office)

Has Theological Study been undertaken at another college? If so which college?:.....

Are you a FEE-HELP student? Yes No - If YES, have you previously submitted a FEE-HELP Assistance Form? Yes/No

If not, you must complete the necessary application form available from the Seminary and submit it with this form.

Primary Sponsoring College (if different from Vose):
(Only applies if you are doing theological studies through another ACT institution)

If cross-enrolling elsewhere: (institution & unit)

REGULATIONS

Refer to separate sheet regarding "VARIATION OF ENROLMENT" with dates and fees as applicable

DECLARATION

I have read the regulations and certify that to the best of my knowledge the above details are correct. I understand that: the information on this form is collected for program administration purposes, including the viewing of graduate survey data by relevant parties such as Graduate Careers Australia, and that my personal information will be stored by the Department of Education, Employment and Workplace Relations (DEEWR) in order to administer my FEE-HELP assistance; authority to collect this information is contained in the Higher Education Support Act 2003; information may be shared between the Australian Taxation Office, DEEWR and the Department of Immigration and Citizenship; and information may not otherwise be disclosed without my consent unless authorised or required by law. Graduates' names are published on the ACT website and manuals. I understand that I may request for my name not to be published. I understand that giving false or misleading information is a serious offence under the Criminal Code. OVERSEAS STUDENTS: "The information provided by overseas students to the provider (Vose Seminary and/or the Australian College of Theology) may be made available to Commonwealth and State agencies and the Fund Manager of the Educational Services for Overseas Student (ESOS) Assurance Fund, pursuant to obligations under the ESOS Act 2000 and the National Code; and the provider is required, under section 19 of the ESOS Act 2000, to tell the Department about: (i) certain changes to the student's enrolment; and (ii) any breach by the student of a student visa condition relating to attendance or satisfactory academic performance". By signing this form I acknowledge that I have read, understand and accept the ACTh Refund Policy and Agreement for Overseas Students.

I hereby declare that I will abide by all the Policies and Procedures as set out in the Vose Student Handbook - go to www.vose.wa.edu.au follow the link: <http://www.vose.wa.edu.au/view/resources/currentstudents/>

I have read and agree to abide by the guidelines in the 'Introducing Vose Library' booklet.

Signature of Candidate Date:
(NB: ONLY the candidate may sign this form – no proxy signatures will be accepted)

SEMINARY PRINCIPAL OR ACADEMIC DEAN ENDORSEMENT:

The above candidate has fulfilled the pre-requisites in order to enrol for the above units

Seminary Endorsement signed: Date:

Office Use Only:	
Fee-Help Form <input type="checkbox"/>	P/Plan Form <input type="checkbox"/>
Parking Permit <input type="checkbox"/>	Student Card <input type="checkbox"/>
Entered TAMS and/or Vose Database <input type="checkbox"/>	
Library Card <input type="checkbox"/>	ATLA <input type="checkbox"/>
Library Card №	