

Student Application Form – RPL

Personal Details

First Name:

Surname:

Street Address:

P/Code:

Home Number:

Mobile Number:

Email:

Date of Birth:

Gender:

Female / Male (please circle)

How did you hear about us? Google Bus Advertisement Newspaper Friend Other

Language mainly spoken at home?

Do you require assistance with English? Yes No

Do you consider yourself to have a disability, impairment or long term condition?

No (go to the next section)

Yes (please tick below – please note, all information provided will be treated confidentially):

Vision

Intellectual

Learning

Hearing

Medical

Physical

Mental Illness

Other (please specify):

If Yes, is assistance required with this application? Yes No

Tick the statement(s) that is most applicable to you?

I work as a Contract Bookkeeper (for myself or for a bookkeeping / accounting practice)

I am employed as a Bookkeeper for one or more small businesses

I am employed as a Bookkeeper for one or more large organisations

Current Employment Details

Company Name:

Contact Person:

Your Position:

Start Date:

Are you able to provide a reference from this employer? Yes No

Are you currently using the skills in this role that you are applying to have recognised? Yes No

Current Employment Details (if currently employed by more than one company)

Company Name:

Contact Person:

Your Position:

Start Date:

Are you able to provide a reference from this employer? Yes No

Are you currently using the skills in this role that you are applying to have recognised? Yes No

Previous Employment Details

Company Name:

Contact Person:

Your Position:

Start Date:

Finish Date:

Are you able to provide a reference from this employer? Yes No

Did you use the skills in this role that you are applying to have recognised? Yes No

Previous Employment Details

Company Name:

Contact Person:

Your Position:

Start Date:

Finish Date:

Are you able to provide a reference from this employer? Yes No

Did you use the skills in this role that you are applying to have recognised? Yes No

Previous Employment Details

Company Name:

Contact Person:

Your Position:

Start Date:

Finish Date:

Are you able to provide a reference from this employer? Yes No

Did you use the skills in this role that you are applying to have recognised? Yes No

Previous Training

Have you ever completed any formal or informal courses relevant to this application?

No (go to the next section)

Yes (please give details)

Name of Course:

Name of Training Organisation:

Date Training Commenced:

Date Training was Completed:

Name of Course:

Name of Training Organisation:

Date Training Commenced:

Date Training was Completed:

Name of Course:

Name of Training Organisation:

Date Training Commenced:

Date Training was Completed:

Invoice Details

Please invoice: Myself My Employer (see below)

Company Name:

Address:

PCode:

Contact Person:

Phone #:

Declaration

I declare that the information provided in this application form is true and correct: Yes No

I declare that I have read and understood the Student Handbook: Yes No

Signature:

Date:

Office Use Only

Student Name:

Student #:

Copy of Student Handbook Declaration Received:

Date Received: / /

Fee:

Invoice #:

Invoice Date: / /

Payment Details: