

Enrolment Form

Start Date: ___/___/___

SYDNEY or MELBOURNE (circle)

Course Name:

Cert II in Retail Make-Up and Skin Care

Cert IV in Make-Up

FEB - Full-time

Mon, Tues, Wed, Thurs
8am – 1pm

MARCH - Casual full-time

Mon, Tues, 5:30pm – 9:30pm
Sat 9am - 4pm

JULY - Full-time

Mon, Tues, Wed, Thurs
1pm – 6pm

Personal Details

1) Enter your full name

Family Name (Surname) _____

Given Names _____

2) Enter your date of birth

Day/Month/Year: ___/___/___

Age: _____

3) Sex (tick ONE box only)

Male

M

Female

F

4) What is the address of your usual residence?

Flat/Unit number, Street number _____

Street name _____

PO Box or Roadside Delivery Box _____

Suburb, locality or town _____

State/Territory _____ Postcode _____

5) Enter your contact details

Home: _____ Work _____ Mobile: _____

Email _____

Language and Cultural Diversity

6) In which country where you born?

Australia 1101

Other – please specify _____

7) Do you speak a language other than English at home?

(If more than one language, indicate the one that is spoken most often.)

No, English only 1201

Yes, other please specify _____

8) How well do you speak English?

1) Very well

2) Well

3) Not well

4) not at all

9) Are you of Aboriginal or Torres Strait Islander origin?

(For persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes)

No

Yes, Aboriginal

Yes, Torres Strait Islander

Disability

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

Yes

No

No = Go to Question 12

11) If YES, then please indicate the areas of disability, impairment or long-term condition:
(You may indicate more than one area.)

Hearing/Deaf 11

Physical 12

Intellectual 13

Learning 14

Mental Illness 15

Acquired Brain Impairment 16

Vision 17

Medical Condition 18

Other 19

Schooling

12) What is your highest COMPLETED school level? (Tick ONE box only.)

Year 12 or equivalent 12

Year 11 or equivalent 11

Year 10 or equivalent 10

Year 9 or equivalent 09

Year 8 or below 08

Never attended school 02

13) In which YEAR did you complete that school level? _____

14) Are you still attending secondary school? Yes Y No N

Previous Qualifications Achieved

15) Have you SUCCESSFULLY completed any of the following qualifications?

Yes Y

No N **No – Go to Question 18**

16) If YES, then tick ANY applicable boxes.

Bachelor Degree or Higher Degree 008

Advanced Diploma or Associate Degree 410

Diploma (or Associate Diploma) 420

Certificate IV (or Advanced Certificate/Technician) 511

Certificate III (or Trade Certificate) 514

Certificate II 521

Certificate I 524

Certificate other than the above 990

Employment

17) Of the following categories, which BEST describes your current employment status?

- Full time employee 01
Part time employee 02
Self employed – not employed by others 03
Employer 04
Employed – unpaid worker in a family business 05
Unemployed – seeking full-time work 06
Unemployed – seeking part-time work 07
Not employed – not seeking employment 08

Employment Details

18) If employed, what are your employer's details?

Employer's Name _____

Employer's Address _____

Employer's Contact Phone Numbers: 1) _____ 2) _____

You are employed as: _____

(We may use this information as a reference for future work experience and contacting you for jobs).

Emergency Contact Details

19) In case of an emergency, who should we contact?

(1) Emergency Contact Person : _____

Address: _____

Relationship to Applicant: _____

Phone: Home: _____ Work: _____ Mobile: _____

Email: _____

(2) Emergency Contact Person : _____

Address: _____

Relationship to Applicant: _____

Phone: Home: _____ Work: _____ Mobile: _____

Email: _____

20) How did you hear about CJMD?: _____

1) Internet **2) Yellow Pages** **3) Newspaper** **4) Word of mouth**

5) Other please specify _____

Fees & Materials

CERTIFICATE II - Course Cost: \$3,300.00 **Deposit:** \$660.00 **Plus Materials:** \$850.00
Amount Paid _____ Date Paid: ____/____/____

CERTIFICATE IV - Course Cost: \$9,900.00 **Deposit:** \$1,485.00 **Plus Materials:** \$1,950.00
Amount Paid _____ Date Paid: ____/____/____

Locker Hire

CERTIFICATE II - \$50.00 (\$20 bond refunded to student upon return of locker key)

CERTIFICATE IV - \$70.00 (\$20 bond refunded to student upon return of locker key)

Yes I would like to hire a locker Amount Paid _____ Date Paid: ____/____/____

Payment Options:

1) Upfront 2) Payment Plan A (Cert II & Cert IV) – 3) Payment Plan B (Cert IV only) –

Payment Plan A (Cert II & Cert IV) – Deposit + choice of fortnightly or monthly payments

Payment Plan B (Cert IV only) – Deposit + an additional \$1500.00 payment will lower your fortnightly/monthly repayments

Please Note: The above payment plan options A & B incur an additional 20% surcharge

This is a legally binding contract. Upon signing this contract, I understand that the deposit is non-refundable. We advise that you read the CJMD student handbook prior to signing your contract. Fees are payable by up-front payment or payment plan. If a monthly or fortnightly selection is made, this must be paid by direct deposit into our account. Our refund policy is detailed in the Student Handbook which available on our website www.cameronjane.com.au or can be sent to you by request prior to you signing this contract.

Applicants Signature

____/____/____
Date

Witness Signature

Witness Name

Bank details for direct deposit
Bank: ANZ
Account Name: Cameron Jane Make-up Design Pty Ltd
Account BSB: 012 487
Account Number: 202 800 487
Please leave your name as a reference

Cheques: Made payable to 'Cameron Jane Make-up Design Pty Ltd'

Please post ALL ENROLMENT FORMS and CHEQUES to Sydney Head Office:
P.O. Box 1309 Strawberry Hills NSW 2012

SYDNEY Campus
Suite 201 / 271 Cleveland Street,
Surry Hills NSW 2010
Phone: 02 9318 1280
Fax: 02 9318 1928
E: cameron@cameronjane.com.au
W: www.cameronjane.com.au

MELBOURNE Campus
13 Rooney Street,
Richmond VIC 3121
Phone: 03 9421 4456
Fax: 02 9318 1928

CJMD NATIONAL CODE NUMBER 90759