



UNIT ENROLMENT FOR VOSE VET AWARDS

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Domestic Student

Overseas Student (on student visa)

Student ID Number:

Surname:

Given Names:

Preferred Name:

Title:

Date of Birth:

Gender: Female Male

Year: ...

Semester: ...

Mode of Study: Full-time Part-time

Are you intending to complete your course this year?

Yes No

Semester Contact Details:

No. & Street:

Suburb:

State:

P/c:

Home Phone:

Mobile:

Email:

Have you experienced any change in disability, impairment, or long term condition? Yes No

If yes, please select the applicable area(s):

- Hearing/deaf Physical Intellectual Learning Mental illness
 Acquired brain impairment Vision Medical condition
 Other (please specify):

Course

Certificate IV in Ministry (CRICOS Code: o888o8K)

Diploma of Ministry (CRICOS Code: o888o9J)

English Readiness for Life and Christian Ministry (CRICOS Code: o9o867C)

Selected Units only

Cross Institutional Enrolment

Certificate IV in Leadership and Management

Diploma in Leadership and Management

Audit

Unsure of Course – please contact

LLN (Language, Literacy and Numeracy) satisfactory Yes No

Additional comments:

Unit Selection (office use only)

Reminder: Please speak to a course pathway advisor regarding your selection of units (Appointments are available through the office).

Unit Code	Unit Title	Semester	Office Use Only
MINATB401A (core)	Prepare and deliver a New Testament bible study	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT
MINATB402A (core)	Analyse and present an overview of the relevance of Old Testament writings	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT
MINATB403A (core)	Lead a topical discussion on a Christian Doctrine	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT
MINSFM401A (core)	Conduct spiritual formation exercises in mentoring and group contexts	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT
Electives (choose 4)			
BSBWOR301	Organise personal work priorities and development	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT
BSBMGT402	Implement operational plan	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT
BSBMGT403	Implement continuous improvement	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT
CHCCCS016	Identify risk and apply risk management processes	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT
CHCPAS001	Plan for the provision of pastoral and spiritual care	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT
CHCPAS002	Provide pastoral and spiritual care	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT

CHCMHS001	Work with people with mental health issues	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT
CHCCCS016	Respond to client needs	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT
MINCCM401A	Conduct analysis of mission agencies	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT
MINCCM402A	Communicate effectively in cross cultural ministry settings	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT
MINDSM401A	Implement and monitor a youth ministry program	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT
MINDSM402A	Engage children safely and effectively in a children's ministry program	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT
MINFWP401A	Contribute to the effectiveness of a ministry team	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT
MINRAW401A	Research and write a theological essay	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT
MINRAW402A	Research and present information on select historical church events or leaders	<input type="checkbox"/> 1 / <input type="checkbox"/> 2 / <input type="checkbox"/> S	<input type="checkbox"/> RPL / <input type="checkbox"/> CT

Has theological study been undertaken at another college? If so, which college?:

If cross-enrolling elsewhere (please list institution & units):

PAYMENT METHOD

Upfront Payment (within 7 days of invoice)

Yes No

Direct Debit Payment (with one-off set up fee – see Tuition Fee Schedule)

Yes No

DECLARATION

Regulations

Overseas Students: "The information provided by overseas students to the provider (Vose Seminary) may be made available to Commonwealth and State agencies and the Fund Manager of the Educational Services for Overseas Students (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.

Variation of Enrolment: Students who wish to vary their enrolment by addition of or withdrawal from a unit should consult the Fee Schedule distributed by Vose for the critical dates that apply to that unit and the procedure to use to apply for a variation. After the Administrative Date and up to the Census Date of a unit, a Variation of Enrolment Fee applies. Withdrawal from a unit after the Withdrawal Date will normally attract a not competent (NC) grade. Refer to separate sheet regarding "FEE SCHEDULE" for dates and fees as applicable.

Closing dates for application: An application for enrolment in a unit lodged after the Administrative Date for the unit shall be subject to the Variation of Enrolment Fee.

I 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 (DEEWAR); authority to collect this information is contained in the Higher Education Support Act 2003; information may be shared between the Australian Taxation Office, DEEWAR and the Department of Immigration and Citizenship; and information may not otherwise be disclosed without my consent unless authorised or required by law. I understand that giving false or misleading information is a serious offence under the Criminal Code. By signing this form I acknowledge that I have read, understand and accept the Vose Seminary Refund Policy and Agreement for Overseas Students. By enrolling in this accredited course of study I declare my intention to complete this course of student (not applicable to cross-institutional enrolments or non-award studies). I hereby declare that I will abide by all the Policies and Procedures as set out in the *Vose Seminary Student Handbook* – see www.vose.edu.au

I have read and understood the above declaration.

I have reviewed the Student Handbook.

I have met with a Course Pathway Advisor to discuss selection of units (book appointments through the office)

I have reviewed the current timetable and am aware of the times and dates of lectures I have enrolled in.

I understand that domestic students who fail to attend 80% of lectures will have their enrolments discontinued and will be required to re-enrol in the respective units. International students who fail to make course progress will be subject to an intervention strategy as outlined in the International Students Handbook, and in some cases, be reported to the Department of Immigration.

I understand that re-enrolment will not be processed until the previous semester's fees have been paid in full (unless direct debit is in place)

Signature of candidate:

Date:

The above candidate has fulfilled the pre-requisites in order to enrol for the above units Yes No

Signature of Course Pathway Advisor:....

Date:

Office Use Only:

<input type="checkbox"/> Reckon Check	<input type="checkbox"/> Entered on Invoicing S/sheet	<input type="checkbox"/> USI received and verified	<input type="checkbox"/> Enrolled PowerPro/AVETMISS
<input type="checkbox"/> PRISMS check	<input type="checkbox"/> Annual Enrolment Fee	<input type="checkbox"/> LLN received and approved	<input type="checkbox"/> Welcome Letter sent
<input type="checkbox"/> Entered on graduation spreadsheet	<input type="checkbox"/> Photo	<input type="checkbox"/> WWC (if applicable)	
<input type="checkbox"/> Entered onto Moodle	<input type="checkbox"/> Parking Permit #:	<input type="checkbox"/> Student/Library Card	<input type="checkbox"/> Student eNews