

Qualification Code	<input type="text"/>	Title	<input type="text"/>
OR units paid for		Unit	<input type="text"/>
		Unit	<input type="text"/>
		Unit	<input type="text"/>

Note the student name provided on this Application for Online Enrolment will be the name used to issue the certificate of graduation

FAMILY NAME	<input type="text"/>	FIRST NAME	<input type="text"/>	Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
MOBILE	<input type="text"/>	EMAIL	<input type="text"/>	DoB	<input type="text"/> / <input type="text"/> / <input type="text"/>		

Student Residential and Postal Address

Sponsor Details

Sponsor name	<input type="text"/>		
Contact person	<input type="text"/>		
Position	<input type="text"/>		
Mobile	<input type="text"/>	Work phone	<input type="text"/>
Email	<input type="text"/>		

Emergency Contact Details

Contact person	<input type="text"/>		
Mobile	<input type="text"/>	Work	<input type="text"/>
Email	<input type="text"/>		
Preferred Doctor	<input type="text"/>		
Mobile	<input type="text"/>	Surgery	<input type="text"/>

Sponsor Postal Address

ACADEMIC AND EMPLOYMENT HISTORY TO SUPPORT APPLICATION

School	<input type="text"/>	Year Graduated	<input type="text"/>	Final Grade	<input type="text"/>
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Additional work or study (include post school qualifications and paid work as well as work experience)

In completing and submitting this Application for Online Enrolment I understand that the IEA College of TAFE will not enrol me unless I have access to a computer and have internet access. **Tuition fees can be remitted per unit of competency, or by full qualification.**

The tuition fee is to accompany this Application for Online Enrolment. This application form and fee can be submitted at any IEA College of TAFE campus office, or emailed to enquiries@tafe.iea.ac.pg. Emailed forms must include a scanned copy of a deposit receipt showing the tuition fee payment to IEA COLLEGE OF TAFE BSP account 1000145268.

Applicants will then receive an email and log in details for the units of competency they have been enrolled in.

<input type="text"/>	Student Signature	<input type="text"/>	Date	<input type="text"/> / <input type="text"/> / <input type="text"/>
Total Tuition fee paid	Sponsor Signature	<input type="text"/>	Date	<input type="text"/> / <input type="text"/> / <input type="text"/>