

POSTGRADUATE ADMISSION APPLICATION FORM

(Domestic Students)



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Please write your answers clearly in print and indicate your answer with where a selection box is provided.

1. Course Selection and Commencement		
<input type="checkbox"/> Graduate Diploma of Sports Administration When do you wish to begin your studies? <i>Select one:</i> <input type="checkbox"/> September 2016 Online <input type="checkbox"/> November 2016 Online		<i>Please note: Graduates of the ACPE Bachelor of Sports Business are not eligible to apply for this course</i>
2. Personal and Address Details		
Title Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/>		Gender Male <input type="checkbox"/> Female <input type="checkbox"/>
Surname /Family Name		Given Names
Date of Birth (day/month/year)		
Email address		
Telephone ()		Mobile Phone ()
Home Address		
Unit/House Number		Street Name
Town/City/Suburb		State
Postcode		Country
Postal Address (if different from above)		
Unit/House Number		Street Name
Town/City/Suburb		State
		Postcode
3. Emergency Contact Person		
Name		Relationship to you
Phone (Home)		Phone (Work)
		Phone (Mobile)
4. Mode of Enrolment		
What is your preferred mode of enrolment? <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		
5. ACPE Application		
Have you previously applied for study or studied at ACPE? No <input type="checkbox"/> Yes <input type="checkbox"/> ► If yes, indicate ACPE student number (if known) _____		
6. Elite Athlete Status		
Are you seeking Elite Athlete recognition? <input type="checkbox"/> No ► go to next section. <input type="checkbox"/> Yes, specify Sport and Program: _____ (ACPE will verify your Elite Athlete status with the relevant external bodies.)		

7. Education and Work Experience

Please list your educational history. Attach certified copies of all academic qualifications including secondary school reports (HSC/ATAR score) and post - secondary education transcripts. Your application will be delayed if your certified documents are not attached. Refer to Section 16 for information about document certification

Secondary School Studies

School	School Location (State, Postcode and Country)	Highest Level Achieved		Year (yyyy) completed	Documents Attached
					<input type="checkbox"/>
					<input type="checkbox"/>
Post-Secondary Education					
Name of Institution	Name of Course including major studies (if applicable)	Course Duration (no. of years)	Study Period (From m/yy To mm/yy)	Year completed or expected completion date	Documents Attached
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

Have you received HECS, FEE-HELP or VET FEE-HELP for any part of your studies listed above? No Yes ► CHESSN _____

Have you ever been excluded from post-secondary school studies on academic or other grounds?
 No Yes ► Please attach details on a separate sheet.

Relevant Work Experience History

Please list your relevant work experience. Attach your supporting documentation such as your current resume, certified copies of work related references and other work related documents to support your application. Your application will be delayed if your certified documents are not attached. Please attach additional pages if space is not sufficient. Refer to Section 16 for information about document certification

Company/Organisation	Relevant Experience	Period of Service	Documents Attached
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

8. Application for Credit (RPL)

Do you wish to apply for exemption/credit based on previous relevant studies or work experience? No Yes
 If yes, you must download and submit the "Application for Recognition of Prior Learning (RPL) Form: separately and attach certified copies of relevant documents including details of subjects completed or relevant work experience.

9. Language Spoken at Home

(E348)

What is the main language that you speak at your permanent home address?

English Language other than English (please state) _____

10. Aboriginal or Torres Strait Islander Descent		(E316)
Are you of Australian Aboriginal or Torres Strait Islander descent?		
No <input type="checkbox"/> Yes <input type="checkbox"/> ► If yes, please indicate <input type="checkbox"/> Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> Both Aboriginal and Torres Strait Islander		
11. Country of Birth		(E346 / E347)
Were you born in Australia? <input type="checkbox"/> Yes ► go to next section. <input type="checkbox"/> No ► Please provide details opposite	Country in which you were born _____ If you are living in Australia, what year did you arrive(YYYY)? _____ You MUST attach documentation to verify your Australian Citizenship status	
12. Citizenship/Residency Status		(E358)
Please indicate your Citizenship status. Please note that normally, only Australian citizens are eligible to receive FEE-HELP assistance	<input type="checkbox"/> Australian Citizen. Includes Australian citizens with dual citizenship. <input type="checkbox"/> New Zealand Citizen or a diplomatic or consular representative of New Zealand, a member of the staff of such a representative or the spouse or dependent relative of such a representative, excluding those with Australian Citizenship. <input type="checkbox"/> Permanent Resident. (Attach a copy of permanent resident visa). <input type="checkbox"/> Temporary Resident. (Attach a copy of your entry permit or evidence you are a diplomat or a dependent of a diplomat (except New Zealand) and residing in Australia for all study. <input type="checkbox"/> Humanitarian Visa. (Attach a copy of your permanent humanitarian visa). <input type="checkbox"/> None of the above (You require a student visa for study in Australia and must use the application form for International Students instead of this form). ►Please state country of Citizenship _____	
13. Disability		(E386)
Do you have any disability, impairment or long term medical condition/s that may affect your studies?		
No <input type="checkbox"/> Yes <input type="checkbox"/> ► If yes, please answer below		
Please indicate the area/s of impairment (More than one option may be selected) <input type="checkbox"/> Hearing <input type="checkbox"/> Learning <input type="checkbox"/> Mobility <input type="checkbox"/> Vision <input type="checkbox"/> Medical <input type="checkbox"/> Other _____		
Would you like to receive advice regarding services and facilities which may assist you with your studies? <input type="checkbox"/> No <input type="checkbox"/> Yes		
Do you have any condition which will require ACPE to make special provisions for you? <input type="checkbox"/> No <input type="checkbox"/> Yes ► Description of disability: _____ Please attach professional practitioner statement explaining your needs.		
14. Education level of your parents or guardians		(E573 / 574)
Parent/Guardian 1 Male <input type="checkbox"/> Female <input type="checkbox"/> No parent or guardian 1 <input type="checkbox"/>	Parent/Guardian 2 Male <input type="checkbox"/> Female <input type="checkbox"/> No parent or guardian 2 <input type="checkbox"/>	
<input type="checkbox"/> Post Graduate qualification (eg. Postgraduate Masters, PhD) <input type="checkbox"/> Bachelor degree <input type="checkbox"/> Other post-school qualification (e.g. VET/TAFE Certificate, Associate Degree or Diploma) <input type="checkbox"/> Completed Year 12 schooling or equivalent <input type="checkbox"/> Did not complete Year 12 schooling or equivalent <input type="checkbox"/> Completed Year 10 schooling or equivalent * <input type="checkbox"/> Did not complete Year 10 schooling or equivalent <input type="checkbox"/> Don't know	<input type="checkbox"/> Post Graduate qualification (eg. Postgraduate Masters, PhD) <input type="checkbox"/> Bachelor degree <input type="checkbox"/> Other post-school qualification (e.g. VET/TAFE Certificate, Associate Degree or Diploma) <input type="checkbox"/> Completed Year 12 schooling or equivalent <input type="checkbox"/> Did not complete Year 12 schooling or equivalent <input type="checkbox"/> Completed Year 10 schooling or equivalent * <input type="checkbox"/> Did not complete Year 10 schooling or equivalent <input type="checkbox"/> Don't know	
15. How did you find out about ACPE?		
<input type="checkbox"/> Friends or relatives <input type="checkbox"/> Internet search <input type="checkbox"/> Radio or television		
<input type="checkbox"/> Magazine or newspaper <input type="checkbox"/> Workplace <input type="checkbox"/> Other, please specify : _____		

16. Application Checklist

Before lodging this form, check that :

- ✓ All sections have been completed
- ✓ Supporting documents have been attached
- ✓ Copies of official documents have been certified
- ✓ The Declaration section has been signed and dated

Documentation

You must submit certified copies of your documents. Faxed, scanned, or uncertified photocopies will not be accepted.

Documents can be certified by any of the following :

- the official records department of the institution which originally issued the document/s
- An ACPE staff member
- a Justice of the Peace with a registration number
- An accountant - must be a member of the Institute of Chartered Accountants in Australia, or the Australian Association of Taxation and Management Accountants or be a Registered Tax Agent
- A bank manager
- A barrister, solicitor or patent attorney
- A police officer in charge of a police station, or of the rank of sergeant and above
- A postal manager
- A Principal of an Australian secondary college, high school or primary school

You or a family member cannot certify your documents, even if you or they belong to one of the categories listed above.

The certifying officer must print the following text on the copied document: 'I certify this to be a true copy of the document shown and reported to me as the original.' They must also include their name, address, contact telephone number, profession or occupation or organisation, the date and then sign the document. The certifying officer should also include the official stamp or seal of the certifier's organisation on the copy, if the organisation has such a stamp. Additionally, a Justice of the Peace must also print their registration number and provide details of the state in which they are registered.

17. Informed Consent and Declaration

Terms and Conditions for Course Application and Enrolment

I (which expression includes the parent/guardian who has signed this contract on behalf of the applicant) hereby apply to enrol in the course commencing at the campus indicated on the Application for Admission form ('the Application'). I agree that on acceptance of the Application by the Australian College of Physical Education ('the College'), and my subsequent receipt and return of the Acceptance of Offer ('the Offer'), the Offer will become the Contract of Enrolment ('the Contract') and further I agree to abide by the following terms and conditions:

1. I must abide by all policies, rules and regulations of the College that are in force at any time and conduct myself in a manner consistent with the College's Student Code of Conduct. I agree to abide by the policies of the College as amended by the College from time to time. (Information on the College's policies, rules and regulations is located on the website <http://www.acpe.edu.au/college-policies.html>.)
2. I understand that if I breach any of the College's policies, my enrolment may be cancelled and I may not be entitled to any refund of the tuition fees or other charges paid to the College under the Contract.
3. It is a condition of my enrolment that I achieve satisfactory academic progress throughout my course at a rate that will enable me to complete the course within the approved maximum completion time and consistent with the College's rules of progress.
4. I agree to pay fees according to the rules, policies, procedures and schedules relating to fees as prescribed by the College. I also understand that failure to pay my tuition fees may result in my enrolment being cancelled. I agree to abide by the refund policy as outlined in this document.
5. I understand that if, after enrolling into my nominated course, I discontinue my studies after the applicable census date, I may remain liable to pay the full semester tuition fees and any expenses, costs or disbursements incurred by the College in recovering any outstanding monies, including debt collection agency fees and solicitors' costs.
6. I understand that tuition fees are reviewed by the College regularly and may be changed from time to time.
7. I authorise the College to obtain medical treatment for myself should such action be deemed necessary by the College or by a staff member acting on behalf of the College. I agree to indemnify and hold harmless the College and its staff for any expense, loss, damage or liability of whatsoever nature or howsoever occasioned as a result of authorising and arranging such emergency medical treatment.
8. I declare that to the best of my knowledge, all documentation and information I have submitted or made available to the College in relation to my course application is true, accurate and complete. I further acknowledge that similar conditions will apply to information submitted by me in the future to support my course application.
9. I am aware that there are severe penalties for providing false or misleading information.
10. I acknowledge and agree that the College may collect, use and disclose personal information or information related to my application or enrolment:
 - in accordance with the College's Student Privacy Policy (available at www.acpe.edu.au) ;
 - to comply with the reporting requirements of Commonwealth and State Government departments and agencies and their

appointed third party providers for the purposes of planning, administration, policy development, surveys, and for other lawful purposes;

- for the assessment of my entitlement of government assistance or benefits;
- in circumstances where it is reasonably believed to be necessary to prevent or lessen a serious threat to life, health, safety or welfare of any person.

11. I authorise the College to obtain from other educational institutions and relevant authorities, details of my enrolment, academic record and examination results for purposes related to my course application or enrolment at the College, and to supply any relevant official records to other educational institutions associated with my studies at the College.
12. I understand that if I enrol as an inbound cross-institutional student at ACPE, I am responsible for providing a copy of my ACPE results to my home institution.
13. I understand that I must advise the College of any change of my address and/or contact details while I am enrolled in any course.
14. I must meet the applicable attendance requirements, undertake the assessments, practical experience placements, and other requirements stated in the course unit outlines during a course of study. I may be required, and permission is hereby granted, to attend College organised excursions and activities as part of the course.
15. All unit resources, lessons and any related material supplied by the College are copyright and remain the property of the College. I understand that any unauthorised copying may constitute a breach of the Copyright Act 1968 (as amended).
16. I understand that tuition fees do not include the cost of textbooks. I am responsible for my own books, equipment and personal items and I hereby release, indemnify and hold harmless the College against all liability and claims for any loss or damage to such items, howsoever caused except where liability is expressly imposed by law.
17. If my course requires me to participate in practical experience placements that require me to have direct contact with children under 18, I must provide a satisfactorily completed Prohibited Employment Declaration for each period of the practical experience placement (in accordance with Child Protection (Prohibited Employment) Act 1998). I may also be required to provide a police records check for my industry experience placement.
18. I accept that the College reserves the right to change the particulars of the services, including changes to prices, units, courses, placements, facilities and dates of programs where circumstances beyond the College's control necessitate such changes or where the level of enrolments does not reach the minimum numbers required to operate a course or course unit viably.
19. I understand that the College has grievance resolution processes in place and that I can access the Academic Appeals Policy and Procedures and the Grievance Policy for Non-Academic Matters on the website www.acpe.edu.au
20. I am responsible for satisfying any requirement pertaining to my professional registration and/or employment accreditation that are beyond the accredited provisions of the course offered by the College. Such requirements may include government examinations, interviews, and other forms of assessment external to my course at the College.

Refund of Fees

1. I understand that I must apply in writing should I wish to cancel my enrolment in a course or withdraw from a unit of study and that I can obtain a full refund of tuition fees related to that unit of study if the College receives my written notification of the unit withdrawal on or before the relevant census date published on the website www.acpe.edu.au
2. I understand that the census date for a unit of study does not occur less than 20% of the way through the period during which the unit of study is being undertaken.
3. I understand that if I advise in writing of my wish to cancel my enrolment in a course or withdraw from a unit of study after the census date, I will not be entitled to any refund of tuition fees related to that unit of study nor will I be entitled for a remission of any FEE-HELP loan associated with that unit of study, unless special circumstances apply.
4. I understand that if special circumstances are the cause of the withdrawal or non-completion, I must submit the form to apply for the Refund of Tuition Fee or Re-credit of FEE-HELP balance within 12 months from my withdrawal date and that I must attach third party supporting documentation with the form.
5. I understand that if I do not meet attendance requirements and/or do not submit assessment tasks for my enrolled unit of study and do not provide written notification of my withdrawal from that unit on or before the census date, I will not be entitled to any refund of tuition fees nor remission of any FEE-HELP loan related to that unit of study.
6. I understand that the College provides a tuition assurance arrangement for students in accordance with the provisions of the Higher Education Support Act 2003 (HESA) and the associated HEP Guidelines, and that the College's membership in the Tuition Assurance Scheme (TAS) protects students in the event of the College ceasing to provide a course of study in which a student is enrolled.
7. This agreement, and the availability of complaints and appeals processes, does not remove the right of a student to take action under Australia's consumer protection laws.

► Applicant's Signature _____ Date (DD/MM/YYYY) _____

STATEMENT ON THE USE OF INFORMATION SUPPLIED WITH THIS APPLICATION

In order to comply with Commonwealth reporting requirements The Australian College of Physical Education (ACPE) Ltd must collect the information from students. It will not be used by the Commonwealth to identify individual students and is used for statistical and policy development purposes. ACPE acknowledges and respects the privacy of individuals. The information you provide on this application form is "personal information" as defined by the Privacy Act 1988. The information you provide is collected and held by ACPE to assess your application and for administrative and statistical purposes. You have the right of access to and alteration of, the information concerning yourself in accordance with the Privacy Act. ACPE will not disclose your personal information without your consent and without due cause, except as required by law, Government regulation, or the requirements for normal operation of ACPE.