



STUDENT APPLICATION & DECLARATION

PERSONAL DETAILS

Surname: _____ Given Names: _____

Address: _____

Telephone: (h) _____ (mob) _____

(w) _____ Email: _____

Employment Information (*Current employment and/or expected employment during the course*): _____

ACADEMIC DETAILS

What level of Secondary education have you achieved? _____

List below any Certificates/Degrees/Trade Qualifications you have received:

Title of Qualification	Name of Institution	Date Award Issued	Course Major/s

Please attach extra sheets where required.

Have you ever been dismissed, suspended, or denied admission by any other institution? If yes, please give details _____

COURSE/STUDY INFORMATION

Course Delivery *please circle the course/delivery mode that you wish to study*

Personal development

One Day Intensive

Fast-track Full Course

Three (3 day) Sessions

Full Course

1 year

Prerequisites

Personal development

All celebrants have to perform at least one (1) marriage every two years and complete one Personal Development training day a year.

Designed for the Celebrant with a current marriage celebrant licence and who are actively involved in Celebrant work.

Qualifications and Transcripts must be presented to the college for verification *prior to the start of the course* or a certified copy attached to this application.

Attached certified marriage celebrant licence number _____ Yes No

I will present my original Qual/Transcript to the college Yes No

Fast-track Full Course

Designed for experienced celebrants, people with certification from another Denomination or a civil licence. This package would suit those with celebrancy experience but no Cert IV in Celebrancy Training or needing to freshen up their skills and knowledge together with learning the new competencies in this latest qualification.

Please provide a brief statement of any celebrancy and training experience. Where possible, attach relevant evidence such as references from employers, statements of attainment, recognition of unaccredited studies, letters from co-workers or clients etc.

Full Course

This course will not presume prior training knowledge. The only prerequisite is that you are a licenced minister.

COURSE/STUDY INFORMATION (cont)

RPL/National Recognition

RHEMA Australia has a policy of National Recognition of studies completed at any vocational training organisation recognised by the Australian Government (referred to as a Registered Training Organisation or RTO). If you have a transcript or statement of attainment with competencies relevant to the Certificate IV in Celebrancy from any RTO and would like to use them towards gaining this Qualification, please indicate below and present your original transcript to the college for verification *prior to the start of the course* or attach a certified copy to this application. This course is accredited through Unity College Australia RTO 6330

Do you wish to apply for National Recognition? Yes No

If yes, RA will contact you to discuss your best options to complete this Qualification.

Attached certified Transcript/s relevant this course Yes No

I will present my original Transcript/s to the college Yes No

Do you wish to apply for Recognition of Prior Learning (RPL) for any competencies in this course? Yes No

If yes, RA will contact you to discuss your best options and will supply you with an RPL Kit as required.....

Can you meet the Course Fees and expenses? Yes No

Are your fees being paid by your employer? Yes No

SPECIAL NEEDS

Not Applicable Visual Loss

Hearing Loss Physical Disability

English Not First Language Other (please specify)

Notes:

COMMITMENT & DECLARATION

I declare that the information I have provided is accurate, that evidence I have presented is authentic and that I have based my responses on my reading of the requirements for the units of competency as provided to me by RHEMA Australia for this training package.

I am prepared to undertake the full discipline of the course with a Christian ethic. I will at all times, endeavour to uphold the integrity of RHEMA Australia.

Signature: _____ Date: ____ / ____ / ____

PRIVACY

Information collected on this form may be collated for course analysis and statistics related to training reports. Information collected is strictly confidential. No report reveals personal information. All information is held in accordance with National Privacy Principles and legislation associated with Registered Training Organisations.

*Please mark clearly **Student Application for Celebrancy** and return completed form to:*

RHEMA Australia Administrator
PO Box 6316
LOGAN CENTRAL QLD 4114

OFFICE USE ONLY

Location Received: _____ *Date:* ____ / ____ / ____

Signature: _____ *DB Entry:* ____ / ____ / ____