

# COUNTRY WRITTEN EXAMINATION ENROLMENT FORM

To ensure correct completion of this enrolment form please refer to the Enrolment forms section of the 2009 VIC Teachers' Handbook.

<p><b>Teacher</b></p> <p>Number (if known)  <input style="width: 100%; height: 20px;" type="text"/></p> <p><input type="checkbox"/> I am a Teacher</p> <p><input type="checkbox"/> Private Entry</p> <p><input type="checkbox"/> I have changed address</p>	<p><b>Teacher / Person Enrolling Candidate (must be 18 or older)</b></p> <p>Title <input type="text"/> First name <input type="text"/></p> <p>Surname <input type="text"/> DOB <input type="text"/></p> <p>Address <input type="text"/></p> <p>Suburb <input type="text"/> State <input type="text"/> Postcode <input type="text"/></p> <p>Phone ( <input type="text"/> ) <input type="text"/> Mobile <input type="text"/></p> <p>Email Address <input type="text"/></p>	<p><b>Document Number/Payment ID</b></p> <p>(for office use only)</p> <p><input style="width: 100%; height: 20px;" type="text"/></p> <p><input style="width: 100%; height: 20px;" type="text"/></p> <p>Enrolment form is:</p> <p><input type="checkbox"/> 1 week late</p> <p><input type="checkbox"/> Over 1 week late</p>
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<p><b>Examination Series Required</b> (tick one only)</p> <p><input type="checkbox"/> 1st Written Metropolitan (Series 15)</p> <p><input type="checkbox"/> 1st Written Country (Series 16)</p> <p><input type="checkbox"/> 2nd Written Metropolitan (Series 17)</p> <p><input type="checkbox"/> 2nd Written Country (Series 18)</p> <p><input type="checkbox"/> 3rd Music Craft (Series 19)</p>	<p><b>Examination Areas</b></p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> 40600 Ararat</td> <td><input type="checkbox"/> 56700 Frankston</td> <td><input type="checkbox"/> 81100 Sale</td> </tr> <tr> <td><input type="checkbox"/> 41400 Bairnsdale</td> <td><input type="checkbox"/> 57200 Geelong</td> <td><input type="checkbox"/> 82900 Shepparton</td> </tr> <tr> <td><input type="checkbox"/> 42100 Ballarat</td> <td><input type="checkbox"/> 59200 Hamilton</td> <td><input type="checkbox"/> 84600 Swan Hill</td> </tr> <tr> <td><input type="checkbox"/> 45300 Benalla</td> <td><input type="checkbox"/> 61400 Horsham</td> <td><input type="checkbox"/> 87000 Traralgon</td> </tr> <tr> <td><input type="checkbox"/> 45500 Bendigo</td> <td><input type="checkbox"/> 65900 Leongatha</td> <td><input type="checkbox"/> 89800 Warragul</td> </tr> <tr> <td><input type="checkbox"/> 49000 Castlemaine</td> <td><input type="checkbox"/> 66300 Lilydale</td> <td><input type="checkbox"/> 90600 Warrnambool</td> </tr> <tr> <td><input type="checkbox"/> 50600 Colac</td> <td><input type="checkbox"/> 69200 Mildura</td> <td><input type="checkbox"/> 91900 Wodonga / Albury</td> </tr> <tr> <td><input type="checkbox"/> 51400 Cowes</td> <td><input type="checkbox"/> 75200 Orbost</td> <td><input type="checkbox"/> 92700 Woodend</td> </tr> <tr> <td><input type="checkbox"/> 51600 Dandenong</td> <td><input type="checkbox"/> 77400 Portland</td> <td><input type="checkbox"/> 93900 Yarram</td> </tr> <tr> <td><input type="checkbox"/> 54700 Echuca</td> <td><input type="checkbox"/> 80500 Rushworth</td> <td></td> </tr> <tr> <td colspan="3"><input type="checkbox"/> Other Please Specify: _____</td> </tr> </table>	<input type="checkbox"/> 40600 Ararat	<input type="checkbox"/> 56700 Frankston	<input type="checkbox"/> 81100 Sale	<input type="checkbox"/> 41400 Bairnsdale	<input type="checkbox"/> 57200 Geelong	<input type="checkbox"/> 82900 Shepparton	<input type="checkbox"/> 42100 Ballarat	<input type="checkbox"/> 59200 Hamilton	<input type="checkbox"/> 84600 Swan Hill	<input type="checkbox"/> 45300 Benalla	<input type="checkbox"/> 61400 Horsham	<input type="checkbox"/> 87000 Traralgon	<input type="checkbox"/> 45500 Bendigo	<input type="checkbox"/> 65900 Leongatha	<input type="checkbox"/> 89800 Warragul	<input type="checkbox"/> 49000 Castlemaine	<input type="checkbox"/> 66300 Lilydale	<input type="checkbox"/> 90600 Warrnambool	<input type="checkbox"/> 50600 Colac	<input type="checkbox"/> 69200 Mildura	<input type="checkbox"/> 91900 Wodonga / Albury	<input type="checkbox"/> 51400 Cowes	<input type="checkbox"/> 75200 Orbost	<input type="checkbox"/> 92700 Woodend	<input type="checkbox"/> 51600 Dandenong	<input type="checkbox"/> 77400 Portland	<input type="checkbox"/> 93900 Yarram	<input type="checkbox"/> 54700 Echuca	<input type="checkbox"/> 80500 Rushworth		<input type="checkbox"/> Other Please Specify: _____		
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**Fees:** Please note: Cash transactions are not accepted. Include enrolment fees, transfer fees and late fees (if applicable).

I enclose my cheque / money order for \$ \_\_\_\_\_ payable to AMEB (VIC).

Credit Card Type (please circle)    Mastercard / Visa

Card Number:     Expiry Date: \_\_\_\_ / \_\_\_\_    Name on Card: \_\_\_\_\_

I authorise the AMEB (VIC) to charge my credit card for \$ \_\_\_\_\_    Signature: \_\_\_\_\_    Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Certification**

I agree to abide by the regulations in the current AMEB (VIC) Teachers' Handbook and Manual of Syllabuses and the policies on the AMEB (VIC) web site. I certify that I am at least 18 years of age.

Signature: \_\_\_\_\_    Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_    Certification **MUST** be signed for enrolment to be processed.

