

**GRADUATE CERTIFICATE IN NURSING (GENERAL PRACTICE)
PRACTICE NURSING 1 (NUR 551) 2010
NEW STUDENT ENROLMENT FORM**



ENROLMENT FORM / TAX INVOICE

2010 Semester Dates (Limited places available)
15 January 2010 - Enrolments close
Semester one starts - 22 February 2010

Personal Details	
Family name: _____ Given name/s: _____	
Contact details – Please tick preferred number for contact	
Telephone: BH _____ <input type="checkbox"/> AH: _____ <input type="checkbox"/> Mobile: _____ <input type="checkbox"/>	
Address for Correspondence (N.B. course information will arrive by post)	
_____ Postcode: _____	
Email address – Please write clearly. To undertake this course you will need access to a computer (to prepare your assignments) and access to the internet and an email address (to access tutor support and online references).	
Email Address: _____	
Employment Details	
Number of years in general practice: _____	
Practice Details: _____	Current Position: _____ I currently work Part Time Hrs <input type="checkbox"/> Full Time Hrs <input type="checkbox"/>
Qualifications	
Registered Nurse (Div 1) University <input type="checkbox"/> or Hospital <input type="checkbox"/> trained Year qualification obtained ____	
Enrolled Nurse (Div 2) University <input type="checkbox"/> or Hospital <input type="checkbox"/> trained Year qualification obtained ____	
Nursing Registration No: _____ (Please attach a photocopy of your current nursing registration certificate)	
Other postgraduate studies recently undertaken to update your clinical skills (please do not include short courses)	

Payment Details	
The cost per unit is \$650 (GST inc).	
By cheque or money order payable to Australian General Practice Network	
Please charge my : MasterCard Visa Amount \$ _____	
Credit Card Number: ____ / ____ / ____ / ____	Expiry Date: ____ / ____
Cardholder's name (print): _____	Signature: _____

