

Melbourne College of Hair & Beauty

2008 LOCAL (VIC) STUDENT ENROLMENT FORM

PERSONAL DETAILS

Student Identification Number:

Family Name: _____

First Name: _____ Middle Name: _____

Date of Birth: _____ Age: _____ Sex: _____

Country of Birth: _____ Nationality: _____

COURSE DETAILS

PREFERRED STARTING DATE FOR COURSE: _____

*Original documents must be shown to MCOHB enrolment representative

Please indicate which course you are applying for:

Hairdressing Course

- | | | | |
|---|----------|---|----------|
| <input type="checkbox"/> Certificate II Hairdressing | WRH20106 | <input type="checkbox"/> Certificate III Hairdressing | WRH30106 |
| <input type="checkbox"/> Certificate IV Hairdressing (Inc. Certificate III) | WRH40106 | <input type="checkbox"/> Diploma in Hairdressing (Inc. Certificate III & IV) Salon Management | WRH50106 |

Hairdressing - Short Courses

- | | | |
|---|---|---|
| <input type="checkbox"/> Professional Cut & Colour | <input type="checkbox"/> Hair Styling for Bridal Industry | <input type="checkbox"/> Select and Apply Hair Extensions |
| <input type="checkbox"/> Creative Texturing and Razor Cutting | <input type="checkbox"/> Men's Hair Cutting | <input type="checkbox"/> Long Hair Design |
| <input type="checkbox"/> Commercial Colour | | |

Beauty Therapy

- | | | | |
|---|----------|--|----------|
| <input type="checkbox"/> Certificate III Beauty Therapy | WRB30104 | <input type="checkbox"/> Certificate IV Beauty Therapy | WRB40104 |
| <input type="checkbox"/> Diploma in Beauty Therapy | WRB50104 | | |

Nail Technology

- | | | | |
|--|----------|---|----------|
| <input type="checkbox"/> Certificate III Nail Technology | WRB30104 | <input type="checkbox"/> Certificate II Nail Technology | WRB20104 |
|--|----------|---|----------|

Beauty - Short Courses

- | | | |
|--|--|--|
| <input type="checkbox"/> Airbrushing | <input type="checkbox"/> Facial Waxing & Body Waxing | <input type="checkbox"/> Brazilian Waxing |
| <input type="checkbox"/> Lash and Eye Brow Treatment | <input type="checkbox"/> Gel or Acrylic Nails | <input type="checkbox"/> Manicure & Pedicure |
| <input type="checkbox"/> Facial Massage | <input type="checkbox"/> Ear Piercing Course | <input type="checkbox"/> Fundamental Makeup Basics |
| <input type="checkbox"/> Bridal Makeup Basics | <input type="checkbox"/> Spray Tanning | <input type="checkbox"/> Eyelash Perming Course |
| <input type="checkbox"/> Eyelash Grafting | | |

TERMS AND CONDITIONS OF ENROLMENT

CRICOS CODE: 02886G PROVIDER NUMBER: 21943 ACN: 124 860 094



Melbourne College of Hair & Beauty

Beauty... Nails... Makeup... Hairdressing

Contractual Agreement for Payment Plan

Between the parties known as:

Melbourne College of Hairdressing Beauty Therapy & Natural Medicine Pty Ltd trading as Melbourne College of Hair and Beauty ACN 124 869 094 Provider No 21943 CRICOS 02886G

Of: 1st Floor, 244 Flinders Street, Melbourne Victoria 3000

And: _____

Of: _____ Post Code: _____

On this day: _____ of _____ of the year _____

FINANCIAL AND CONTRACTUAL DETAILS OF THIS CONTRACT

Upfront Administration fee of A\$

Course Fee A\$

Upfront Students Kit (if applicable) (Large Brush Kit) A\$

Total payable A\$

Please Initial this page X _____ Please date this page X _____

Commencement date of studies: _____

Completion date of studies: _____

This contract is validated on receipt of the following:

Melbourne College of Hair and Beauty ACN 124 869 094 Provider No 21943 CRICOS 02886G

Current course Fees	\$
Kit	\$
Administration fees	\$
Payable	\$

Payment Summary

Fees and on costs	\$	
Paid	\$	Course Deposit
Paid	\$	Students Kit
Remaining Balance owing	\$	

Furthermore I shall agree to make () equal and remaining fee installments for the sum of \$..... on the first day of each month for the remaining..... months, being the remainder owing for the term of the contract.

I understand that the Administration Fee is non refundable under any conditions, and this amounts constitutes \$250.00 (two hundred and fifty dollars only).

I further understand that the first installment is non refundable under certain conditions (except in the circumstances where a Visa has not been granted for the International Students only).

I have been issued with a complete copy of the Refund Policy; the Student's Handbook and I have a full understanding of the conditions which apply in regards to claiming a refund.

I further agree that all the Terms and Conditions of this contract have been made aware to me, and that I have full understanding of the terms and conditions of this contract, and that should I not meet these terms and conditions that Melbourne College of Hair & Beauty has legal rights to recover any monies owed to them.

please Initial this page X_____

please date this page X_____

REFUND POLICY

- I understand that if I withdraw from my studies I am liable for the remainder of any unpaid fees, and this must be forthcoming within a 7 day period, and Melbourne College of Hair & Beauty has legal rights to reclaim any monies owed by myself, and they may exercise this right.

- I agree that if I abandon my studies, (non attendance or notice of non-attendance for a period of 3 study days), that I am under obligation of this Contract to pay all monies owing within 7 days or legal proceedings will be taken against me, and any Credit Agencies will be notified of my debt. The payment is to be the **FULL** amount outstanding.
- I understand that if I am not financial in my payment that Melbourne College of Hair & Beauty has the right to suspend my tuition until all fees are current, when I can re-commence my studies, and that this decision is at the sole discretion of the College Director.
- I further agree that all these conditions have been made aware to me, and that I have full understanding of the terms and conditions of this Contract, and that should I not meet these terms and conditions, Melbourne College of Hair & Beauty has legal rights to recover any monies owed to them.
- I understand that all payments under the Payment Plan is due on the 1st of each month, for the term of the Contract as I have agreed and signed on.
- I also agree that I have been issued with Melbourne College of Hair & Beauty Student's Handbook and agree to the Policies and Procedures within, and that breach of these Policies will cause my enrolment to be cancelled, upon which no refund is due and all remaining fees must be paid within 7 days of written notice from Melbourne College of Hair & Beauty.
- I also understand that Melbourne College of Hair & Beauty has the right to terminate my studies and file charges against me in the event that I willingly or unwillingly commit an offence where the Police Department is notified and charges may be laid against me. These conditions include but are not limited to: theft and willful damage or destruction of property to which I will become financially liable to pay full restoration.

All requests for refunds must be lodged in writing to the College Director.

- **In the event that a student enrolls into studies within the 14 day period then no refund will apply regardless of reason or circumstance. If the student does not commence studies at all after enrolling within the same 14 day period, this is formal notification of this condition in relation to no refund.**
- Only upon notice of **not less than one (1) complete calendar month prior to commencement** of studies will a refund is granted.
- In the event that **less than one complete calendar month notice is provided, but at least 14 days notice** is provided then the refunds will be adjusted accordingly to the period of notice given, at the ratio of 20% of the total course fee for each **14 day period**.
- This condition also applies to International students once the VISA has been approved, and the student does not commence their scheduled studies.
- In the event **of less than 14 days notice being given, then no Refund will apply** regardless of reason, and the 20% placement fee and initial deposit will not be refunded.

- Where a refund has been deemed payable the payment will be **made within 14 days**.
- Where the course does not commence on the agreed commencement date, the student will be notified within 14 days of the event, and will also be notified of the new commencement date.
- In the event that the course does not commence at all, the student will be provided with a full refund **within 14 days of being notified**.
- In the event that the course is cancelled before its completion date, the student will be provided with a proportionate refund **within 14 days**, and the College will endeavor for the student to be placed in an appropriate Registered Training Organisation to allow the student to complete their course of study.

CONFIRMATION OF CONTRACTUAL AGREEMENT

_____ Please write your full name _____ Please sign here

Witness to complete

Sandra Piva Please write your full name

College Director Occupation

Contact Details: _____ **Signed** _____ **Dated** _____

Office use only:

Administration Fees \$ 250.00 **Receipt No.** _____ **Dated:** _____

Initial Payment A\$ _____ **Receipt No.** _____ **Dated:** _____

Balance owing A\$ _____

Balance to be paid by equal **Monthly payments of A\$.....**

Signed: _____ **Dated:** _____

Students Handbook Issued : **Yes** **No** **Refund Policy Issued:** **Yes** **No**

Induction file completed on: _____ **Inducted by:** Sandra Piva

ACCEPTANCE OF DOCUMENTS IN RELATION TO CURRENT ENROLLMENT

As part of my enrolment which was completed to-day at Melbourne College of Hair & Beauty, I confirm that the following documents and information was supplied to me on this day, and that I am in agreeance to the Rules and Regulations including the Policies and Procedures of Melbourne College of Hair & Beauty.

Futher to the information given to me today, I understand that under the Privacy Laws and Acts that the Edge Acts will not release any information with regards to me to any other person, or individual without my express written authority, and that I shall notify Melbourne College of Hair & Beauty in writing should this instance occur.

I further declare that I have been issued with a full version of The Students Handbook, and that I agree to abide by its enire contents.

I also confirm that I have been issued with a complete version of the Refund Policy (as contained within the Students Handbook) on this day, and have a full understanding of the Policies and Procedures contained within the document.

I also have been notified with regards to the Confidentiality and Copyright protection which has been provided to me by Melbourne College of Hair & Beauty which denotes that I will be provided with manuals and other.

I further agree that I shall abide by the compulsory dress code (including footwear dress code), and that the Students Handbook contains the Policies and Procedures including Rules and Regulations of Melbourne College of Hair & Beauty, and this written notification is my first and final warning in relation to the breaches of Melbourne College of Hair & Beauty.

Students Name: _____

Student's Identification Number: _____

Course of Enrolment: _____

National Qualification Code: _____

Commencement Date: _____

Students Signature: _____ **Date:** _____

Witness Name: _____ **Witness signature:** _____

Date:



MELBOURNE COLLEGE OF

HAIR & BEAUTY

EMERGENCY CONTACT DETAILS

In the event that we may need to contact a family member on your behalf, please provide the details of the family member you wish us to make contact with, in the event that this person is not contactable, please provide a secondary contact that we may access on your behalf in the case of an emergency. Please be aware that this information is NOT provided to any other person, apart from those where the information is vital in relation to contacting a person on your behalf, and it will only be used in the case of an emergency.

Your Name:

Person to be contact on your behalf:

Relationship to you:

Contact Details: mobile:

home:

Address:

Please list any medical conditions that we need to be aware of:

Signed

Dated

Please print your name.