Application Form 2012 Web

Allied Health Assistance Professional Development Program Short Course

[ ] Session 1: 20 September 2012
[ ] Session 2: 20 September 2012
[ ] Both sessions

Tick session/s attending
Applications close 3 weeks prior to commencement
Late applications considered if course positions remain available

Full Name _____ Male ❑ Female ❑ *(please tick)*

Postal Address _____

City _____ State _____ Postcode _____

Tel. (Work) _____ (Home) _____ Fax _____

Mobile _____ Email _____

Name of employing organisation _____

Work address _____

City _____ State _____ Postcode _____

Current position _____ Date commenced _____

Educational standard/qualifications relevant to this course _____

How did you first hear about this course?

❑ Mayfield Website ❑ Friend ❑ Work Colleague ❑ Mailout

❑ Advertisement (Please specify ie newspaper/journal/radio) _____

❑ I am a past student of Mayfield ❑ Other _____

Fee Payment.
Fee is $170 per person half day seminar $350 per person full day
Fee is being paid by ❑ Self ❑ Employer ❑ Other *(Please tick)*

Cheque/money order enclosed payable to Mayfield Education Inc or

Charge to ❑ Bankcard ❑ VISA ❑ Mastercard

Cardholders Name _____ Card Expires _____

Card Number ___/___/___/___/ ___/___/___/___/ ___/___/___/___/ ___/___/___/___/

Authorised Signature _____ Date _____

Send to:
Student Services
Mayfield Education
2-10 Camberwell Road
Hawthorn East Vic 3123

Phone: (03) 9882 7644
Fax: (03) 9882 7518
Email: info@mayfield.edu.au
Website: www.mayfield.edu.au

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