

PERSONAL DETAILS
Student ID _____

If known
Name _____

Title
Surname
Christian name(s)
If your preferred name is not your first name, please specify
Address *Street/PO Box* _____

Suburb _____

State _____

Postcode _____

Phone Contact *Work* _____

Home _____

Mobile _____

Email _____

Date of Birth _____

/ /
dd/mm/yyyy
Occupation _____

Gender
 Male

 Female

Church Attending _____

Marital Status _____

Name of Spouse _____

If applicable
Next of Kin
Name _____

Relationship _____

Phone Contact details
Work _____

Home _____

Mobile _____

Are You Seeking Ordination? _____

If so, which Diocese/Denominaton? _____

ACADEMIC BACKGROUND

Please list your previous tertiary studies.

YEARS		INSTITUTION	AWARD (Abbreviation)
FROM	TO		

Admission requirements:

Graduates: Please provide transcripts of all tertiary study

Others may be admitted by special provision as mature age students (Please contact Registrar)



Reference

Confidential

This section to be completed by applicant

Name of Applicant: _____

Course applied for: _____

Commencing study in year 20__

Details of Referee:

Name _____

Street/PO Box _____

Suburb _____ Postcode _____

Daytime phone _____ Mobile _____

Occupation _____ Church Attending _____

This section to be completed by referee

The above person is applying to Moore College to train for gospel ministry. The College would appreciate your comments about the applicant. Please include both demonstrated strengths and weaknesses.

I have known the applicant since (year) _____ Capacity _____

Personal Life (eg, godliness, commitment to ministry, knowledge of Bible, prayer, family)

Relational Skills (eg, ability to relate to all ages and the opposite sex, sympathy, compassion)

Leadership Ability (eg, ability to gather, unite and direct a group, handling conflict/ opposition, delegation)

Gifts for Ministry (eg teaching, preaching, leading church meetings, evangelising, caring for others, pastoring, organisational skills)

Any limitations, reservations or areas of improvement

Do you have any reservations about recommending this applicant

(a) for theological study? _____

(b) for ordination (if applicable)? _____

Signature _____ Date _____

Confidential: The contents of this form are to be kept Confidential by the Referee and the College.

GOVERNMENT STATISTICS

All students enrolled in a course offered by the College are required to complete this form. The information is used to comply with Australian Government reporting requirements under the *Higher Education Support Act 2003* and for the allocation of Commonwealth Higher Education Student Support Numbers (CHESSN).

Have you completed this form previously? No Yes – Have any details changed? If so, please specify where appropriate.

CITIZENSHIP DETAILS

1. What is your citizenship status?

- Australian citizen (including citizen with dual citizenship) – 1
- New Zealand citizen excluding those with Australian citizenship
(Note: Includes any such persons who have Permanent Resident status in New Zealand) – 2
- Students with permanent humanitarian visa – 8
- Students with permanent visa other than permanent humanitarian visa – 3
- Temporary Entry permit and resides in Australia during unit of study – 4
- Not one of the above categories and student is residing outside Australia during the unit of study – 5

2. Are you of Aboriginal or Torres Strait Islander descent?

- Not applicable Aboriginal Torres Strait Islander Both

3. Country of birth

- Australia
 Other – please specify _____ Year of arrival in Australia _____

4. What language do you speak at home?

- English Other – Please specify _____

EDUCATIONAL DETAILS

5. Secondary education

Did you complete Year 12 (or the equivalent final year in another state)? No Yes

Which year did you complete secondary education? _____

6. What was your TER, UAI, ATAR score, or equivalent? (if applicable) _____

7. Have you attended another higher education provider?

- No
 Yes Provider name _____
Award/s attained _____
Do you already have a CHESSN? No Yes – what is your CHESSN? _____

8. Highest educational attainment of your first parent or guardian?

This parent or guardian is Male Female

Their highest educational attainment is:

- Postgraduate Bachelor degree Other tertiary (e.g. VET/TAFE)
- Completed Year 12 or equivalent Did not complete Year 12 or equivalent
- Completed Year 10 or equivalent Did not complete Year 10 or equivalent
- Don't know

9. Highest educational attainment of your second parent or guardian?

This parent or guardian is Male Female

Their highest educational attainment is:

- Postgraduate Bachelor degree Other tertiary (e.g. VET/TAFE)
- Completed Year 12 or equivalent Did not complete Year 12 or equivalent
- Completed Year 10 or equivalent Did not complete Year 10 or equivalent
- Don't know

OTHER DETAILS

10. Do you have a disability, impairment or long-term medical condition?

No Yes, I have the following:

- Hearing
- Learning
- Mobility
- Vision
- Medical condition
- Other Please specify _____

Would you like to receive advice on support services, equipment and facilities that may assist you?

No Yes

PLEASE RETURN COMPLETED FORMS AND ACCOMPANYING DOCUMENTS

POST	EMAIL	FAX
The Registrar Moore College 1 King Street NEWTOWN NSW 2042	registrar@moore.edu.au	(02) 9577 9988

CONTACT DETAILS**Name**

Title

Surname

Christian name(s)

*If your preferred name is not your first name, please specify***Address** Street/PO Box

Suburb

State

Postcode

Phone Contact Work

Home

Mobile

Email

Date of Birth

/ /
dd/mm/yyyy**FEES: \$1,654 per unit (2012 Year 1 units)**

Last due date for UPFRONT fees:

Semester 1 units: 23 April 2012

Semester 2 units: 13 August 2012

PAYMENT DETAILSDeduct my credit card: Visa Mastercard Amex

Card Number _ _ _ _ / _ _ _ _ / _ _ _ _ / _ _ _ _

Expiry Date _ _ / _ _ Amount \$ _____

Name on Card _____

Signature _____ Date _____

PLEASE RETURN COMPLETED FORM AND ACCOMPANYING DOCUMENTS

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The Registrar
Moore College
1 King Street
NEWTOWN NSW 2042

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