STUDENT ID NUMBER										
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	STUDENT ENROI	LMENT FORM					
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Please complete all sections of the PERSONAL DETAILS	s form.		Tick boxes where appropriate.				
Surname :		Official Student Email:					
Other Name(s):		Work / Personal Email :	·				
First Name :		Phone Contact(s) Mobile :					
Date of Birth :	(DD/MM/YY)	Home :					
Private Student	Local Student	Postal Address:					
Sponsored Student	Regional/International Student						
Name of Sponsor (if sponsored)		-					
B PROGRAMME OF STUDY							
Year:	Specify if Any Other Terr		-				
Summer Short Course	Semester Trime		GS Term				
	1 2 1 2	3 3 4	1 2				
College:							
Campus/Centre:							
Programme enrolled in :							
Major 1:	Major 2:						
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C UNIT(S) / COURSE(S) OFFERED							
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Application Vetted							
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	Dean's Approval						
Name:	Name:						
Signature:	Signature:						
Date:	Date:						
(DD/MM/YY)	(DD/MM/YY)						
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