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| **C:\Users\CITTI\Desktop\QA Docs\LOGOS\CI Tertiary Training Logo only.jpg** COOK ISLANDS TERTIARY TRAINING INSTITUTE  **ENROLMENT FORM 2022** | | | |
| **Personal details** **– confidential** (please use block capitals) | | | |
| **ALL students require A COPY OF their PASSPORT and vaccination certificate/card** | | | |
| **SURNAME:** (as per passport) **Date of Birth:** / / **Gender:** M/F | | | |
| **FIRST NAME/S:** (per passport) **NSN:** | | | |
| **Phone:** | **Mobile:** | **E-mail:** | |
| **Campus:** (tick 1) **Trades Hospitality PA ENUA** which island? | | | |
| **Ethnicity/Citizenship:** | | | |
| **Emergency/Contact Person:** | | | |
| **Relationship:** | **Phone:** | **Mobile:** | |
| **course Information** | | | |
| **Name of Course:** | | **Start date:** | **End date:** |
| **In this field of study, do you have WORK EXPERIENCE EDUCATION  N/A** | | | |
| **Have you enrolled at CITTI before?** If yes, specify which course, last year of enrolment? | | | |
| **Course title:** | | **Year:** | |
| **Do you have experience in this field of study?** If yes, please explain: | | | |
| **education** | | | |
| **Last school attended:** | | **Country:** | **Year:** |
| **Other Educational Institutes attended:** |  | | |
| **Highest Qualification Achieved:** | **NCEA CERTIFICATE DIPLOMA DEGREE MASTERS PHD** | | |
| **occupation** | | | |
| **Current Status: UNEMPLOYED STUDENT SELF-EMPLOYED OTHER Explain:** | | | |
| **Looking for work?** Specify which industry/position you would be interested in? | | | |
| **Name of current Company/Organisation:** | | | |
| **Your current Job Title: No. of years in this job:** | | | |
| **Name of Employer:** | | **Phone:** | **Email:** |
| **Conditions/learning Needs** | | | |
| **Do you have any physical or medical conditions?** Please specify: **Doctor:** | | | |
| **If yes, what assistance may be required in an emergency: Mobile:** | | | |
| **Do you have any special learning needs?** Pleasespecify: **Internet Access:** Y/N | | | |
| **FINANCE** | | | |
| **Is your employer paying for your fees? YES NO Financial contact name/number:** | | | |
| **Agreement** | | | |
| 1. **Fees** pertaining to the course (as per the Prospectus) are paid upon enrolment. Special agreement may be negotiated to pay fees in instalments.  2. **80% attendance** is required to give a reasonable chance of success at assessment time.  3. **Refund Policy** for withdrawal is found in the Learner Handbook, given to all students upon enrolment.  4. **Disclaimer**: Please be advised that photographs/videos may be taken during this course for use on the CITTI website including our official Facebook page for marketing materials and other institute publications. By signing this form, you consent to CITTI using your image for this purpose only.  Tick this box if you wish to withdraw your consent. | | | |
| **STUDENT SIGNATURE: ADMINISTRATOR:**  **DATE: DATE:** | | | |

**Office use Accredited Course  Non-accredited Course  Visa verified/Passport Copy attached  PAYMENT RECEIPT #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Interview completed  Enrolment confirmed  Entered into EDGE \_\_\_\_\_\_\_\_\_\_\_\_\_\_**