

Please complete this form and return together with your payment to:

The Program Coordinator
The School For Excellence
Level 1, 477 Collins Street Melbourne 3000.

Facsimile: 03 9663 3939

To ensure your application is promptly processed, please ensure that you have completed ALL sections of the enrolment form, read and signed the Conditions of Enrolment and selected more than one session preference per subject (where possible).

SECTION 1: APPLICANT DETAILS

First Name: _____ Surname: _____

Address: _____

Suburb: _____ Post Code: _____

Telephone: (Home) _____ (Mobile) _____

Year Level in 2010:

- Year 11 Studying Year 12 Subjects
- Year 11
- Year 10 Studying Year 11 Subjects

Email Address: _____

Confirm Email Address: _____

School Attending: _____

Please indicate how you were informed about this program:

- School – Teacher
- School – Newsletter
- School – Brochure on Display
- Newspaper/Magazine
- Radio
- Internet/TSFX Website
- Email
- Referred by Friends
- Referred by Family
- Letter in Mail
- Previous Student
- Other _____

******* CLOSING DATE *******

Closing date for postal applications: Thursday 4th March 2010.
Applications after this date must be made in person or via facsimile.

SECTION 2: SUBJECT AND SESSION DETAILS

Please enrol me into the following subject(s). (Circle one payment option for each subject).

Subject	Periodic Payment* (Half Year)	Upfront Payment (Half Year)	Upfront Payment (Full Year)	Recent School Marks
Chemistry	\$195*	\$625	\$1185	
Maths Methods (CAS)	\$195*	\$625	\$1185	
Physics	\$195*	\$625	\$1185	

*Periodic Payments: The balance of fees (\$480) is payable in four fortnightly payments of \$120 commencing Week 2 of the Master Class course.

SECTION 3: PAYMENT DETAILS

Please make Cheque and Australia Post Money Orders payable to:

The School For Excellence.

Total Payment Enclosed: \$ _____ Date: _____

PLEASE COMPLETE IF PAYING BY CREDIT CARD:

Please debit my: MasterCard Visa

For a total of \$ _____ Expiry Date: _____/_____/_____

Card Number: _____/_____/_____/_____

Cardholder's Name: _____

Cardholder's Signature: _____

SECTION 4: CLASS TIME PREFERENCES

Where possible, please select at least **three different times** per subject. Please indicate your session preference by numbering choices (where 1 represents your first preference). **PLEASE DO NOT SELECT A TIME** that you **cannot** attend as refunds will not be issued if you are allocated any of your selected times. Students who have only nominated 1 preference per subject run the risk of missing out on a position in this course. Once a particular time slot has booked out, students who have only nominated the booked out time slots will be required to select from the remaining available class times. It is therefore in each student's best interests to provide as many preferences as possible. **Please Note:** Students who have a preference for a particular teacher are strongly advised to select as many different session times as possible. The more session times selected across different days, the better each student's chance of being allocated their preferred teacher(s).

	Thursday 5 - 7pm	Friday 4.30 - 6.30pm	Friday 7 - 9pm	Saturday 9 - 11am	Saturday 11.30 - 1.30pm	Saturday 2.30 - 4.30pm	Sunday 9 - 11am	Sunday 11.30 - 1.30pm	Sunday 2.30 - 4.30pm
Chemistry	No Class								No Class
Maths Methods (CAS)									
Physics	No Class	No Class		No Class	No Class			No Class	No Class

Do you have a preference for any particular teacher? **If yes**, please provide the name(s) of these teacher(s): _____

At what preference should we cease trying to allocate your preferred teacher? Please do not go past my _____ preference (insert preference number eg. 3rd, 4th...7th).

If you would like to be placed into the same class as a friend, please indicate their name(s):

SECTION 5: CONDITIONS OF ENROLMENT

Students (applicants) are required to attend the same session for the duration of the course. Students who cannot attend their scheduled class(es) may **temporarily** attend a different class time, providing sufficient notice is given to the Administration staff. There are **no refunds for missed classes** and Periodic Payment Plan applicants are required to pay for classes they have not attended. In the event that the applicant ceases attending classes, the balance of fees will be due within a ten day period. In the event of a default by the applicant/parent/legal guardian in payment of fees when due and payable in accordance with the schedule detailed overleaf, the applicant/parent/legal guardian shall be responsible for any bank charges, legal costs and/or any recovery agent's commissions incurred in the recovery of such unpaid fees. Course cancellations will only be accepted in writing prior to the advertised closing date and will incur a \$30 fee per subject. No cancellations will be accepted for applications received after each Closing Date. A full refund will be issued in the event that all positions have been filled or if the nominated preferences cannot be accommodated. Although every effort will be made to deliver content in line with a school's curriculum, this may not be possible in all cases. Although every effort will be made to adhere to the advertised dates and times, The School For Excellence reserves the right to alter any session details. In the event that session details are altered, all students will be promptly notified. The student agrees to adhere to the **Code of Conduct** detailed at www.tsfx.com.au/vic/code. Please contact our office to obtain a copy of this Code if you are unable to access this document from our website.

I have read the conditions detailed above and agree to the terms therein. Date: _____

Name of Student: _____ Signature of Student: _____

Name of Parent/Legal Guardian: _____ Signature of Parent/Legal Guardian: _____