

Diploma of Accounting (FNS50215)



To complete your application form:

- 1. Complete all the questions by typing or writing into the spaces provided. Fields marked with * are compulsory
- 2. Read and sign the declaration at the end of the form by typing your full name
- 3. Provide a copy of only one form of ID (e.g., driver's licence, passport, birth certificate, Medicare card)
- $4. Save or scan and then email the completed enrolment form along with a scanned copy of your ID to {\tt pathways@publicaccountants.org.au}\\$

1 Personal Information				
Salutation*:	Dr Mr Mrs Ms Miss Other			
Full Name*:				
Preferred Name:	Gender*: Male Female Other			
Date of Birth*:				
Permanent Reside	ential Address (Cannot be a P.O. Box)			
Street Address*:				
	Suburb*: State*:			
	Postcode*: Country*:			
Business Details				
Company:	Job Title:			
Street Address or PO Box:				
	Suburb: State:			
	Postcode*: Country:			
Primary Mailing Address*: Residential or Business				
LinkedIn URL:				
Office Phone:	() Home Phone*: ()			
Mobile Phone*:				
Primary Email*:				
Other Email:				

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2	Unique Student Identifier (USI)
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All students undertaking any Nationally Recognised Training delivered by a Registered Training Organisation (RTO) are required by law to provide a USI. We cannot issue your Qualification or Statement of Attainment without a USI. To create a USI please visit www.USI.gov.au

www.USI.gov.au	. or recall interior with out a or	on to create a con pieus	oc visic
Your USI*:			
3 Course and Modules Note	e (Office use only) :		
Are you a new student to the Diploma of Accounting with us?			
If yes, a non-refundable application fee of \$150 will be charged.*	Yes No		
Diploma of Accounting (FNS50215)	Online	RPL	
	Price		
Full Course Enrolment Discount	\$1,971	Yes No	
or			
Modules			
DA 1 – Accounting Systems	\$608	Yes No	\$456
DA 2 - Individual Tax Returns & Business Performance	\$405	Yes No	\$304
DA 3 - Budgets, Forecasts & Corporate Reporting	\$608	Yes No	\$456
DA 4 - Control Procedures & Management Accounting	\$608	Yes No	\$456
or _			
Individual Units			
DA 1 – Accounting Systems			
BSBITU402 - Develop and use complex spreadsheets	\$203	Yes No	\$152
FNSBKG402 - Establish and maintain a cash accounting system	\$203	Yes No	\$152
FNSBKG403 - Establish and maintain an accrual accounting sys	tem \$203	Yes No	\$152
DA 2 - Individual Tax Returns & Business Performance			
FNSACC501 - Provide financial and business performance infor	rmation \$203	Yes No	\$152
FNSACC502 - Prepare tax documents for individuals	\$203	Yes No	\$152
DA 3 - Budgets, Forecasts & Corporate Reporting			
FNSACC503 - Manage budgets and forecasts	\$203	Yes No	\$152
FNSACC504 - Prepare financial reports for corporate entities	\$203	Yes No	\$152
FNSACC301 - Process Financial Transactions and Extract Interir	n Reports \$203	Yes No	\$152
DA 4 - Control Procedures & Management Accounting			
FNSACC506 - Implement and Maintain Internal Control Procedu	ures \$203	Yes No	\$152
FNSACC507 - Provide Management Accounting Information	\$203	Yes No	\$152
BSBFIA401 - Prepare Financial Reports	\$203	Yes No	\$152

Diploma of Accounting (FNS50215) Enrolment Form

Membership No.						
Association Membership: AFA FPA SMSFA IFAAA CPA CA IPA MFAA Other						
Have you previously studied with Mentor Education*? (Previously known as RG146 Training Australia)						
Cturdu Dagger						
4 Study Reason						
Of the following categories, which BEST describes your main reason for undertaking this course?						
To get a job To develop my existing business Personal interest or self-development						
To start my own business To try for a different career Other reasons						
To get a better job or promotion						
I wanted extra skills for my job To get into another course of study						
5 Language and Cultural Diversity						
In which country were you born*?						
Australia Other, please specify:						
Do you speak a language other than English at home*?						
No, English only Yes, please specify:						
How well do you speak English*? Very well Well Not well Not at all						
Are you of Aboriginal or Torres Strait Islander origin*? No Yes, Aboriginal Yes, Torres Strait Islander						
6 Disability						
Do you consider yourself to have a disablity, impairment or long-term condition*?						
If YES, please select the area(s) in the following list: (You may indicate more than one area)						
Hearing/deaf Physical Learning Intellectual Vision Acquired brain impairment						
Mental Illness Medical Condition Other, please specify:						

7 Schooling							
What is your highest COMPLETED school level*?							
Year 12 or equivalent	Year 11 or equivalent Year 10 or equivalent						
Year 9 or equivalent	Year 8 or below Never attended school						
In which YEAR did you complete that school level*?							
Are you still attending secondary school*?							
Did you complete Year 12 in Australia*?	Yes, what year?						
Please provide the name of the suburb/town with the postcode of your permanent home residence in Year 12 Suburb/town: Postcode:							
8 Previous Qualifications Achieved							
Have you SUCCESSFULLY completed any of	the following qualifications*? Yes No						
If YES, then tick ANY applicable boxes.							
Bachelor degree or higher degree	Advanced diploma or associate degree Certificate I						
Diploma (or associate diploma)	Certificate IV (or advanced technician) Other Certificates						
Certificate III (or trade certificate)	Certificate II						
9 Employment							
Of the following categories, which BEST describes your current employment status? (Tick ONE box only)*							
Self-employed - not employing other	Full-time employee Employer						
Unemployed - seeking full-time work	Part-time employee Employed - unpaid worker in a family business						
Not employed - not seeking employn	nent Unemployed - seeking part-time work						



Statements and Conditions

Privacy Statement

I understand that MENTOR EDUCATION Pty Ltd is a Registered Training Organisation [RTO 21683] registered with the Australian Skills Quality Authority [ASQA] and is required to comply with the Privacy Act 1988 and the regulatory guidelines as determined by ASQA in compliance with the National Vocational and Training Regulation Act 2011.

I understand that from time to time MENTOR EDUCATION Pty Ltd is required to provide student and training activity data or reports in accordance with regulatory guidelines, as instructed by its governing registering body or government authority or in compliance with the terms and conditions of contracts for government funded training.

I understand that MENTOR EDUCATION Pty Ltd, the government or relevant authority may use this information to assist in planning, administration, policy development, program evaluation, resource allocation, reporting and/or research activities. For these and other lawful purposes, MENTOR EDUCATION Pty Ltd, the government or relevant authority may also disclose information to its consultants, advisers, various government agencies, media partners, professional bodies and/or other organisations. For more information in relation to how student information may be used or disclosed refer to the Privacy Policy.

Fees and Refunds

Fees and refunds are detailed in Mentor Education Student Information Guide

The following is a summary of key points:

- · Student have two attempts to complete multiple-choice assessments. A third attempt is available for a fee of \$15.
- · An extension of time is available at a fee of \$145.
- If a student re-enrols in a course that has lapsed, the student will receive a 20% discount off the recommended retail price published on the Mentor Education website.
- Re-issue of a certificate (partial or full completion) will attract a \$50 fee for each.
- · Re-issue of manuals will attract a \$75 fee for each manual. This fee includes postage costs within Australia.

Refunds will not be applicable in instances where materials have been distributed or where external provider fees are due. A refund of course fees may be made when MENTOR EDUCATION Pty Ltd is unable to proceed with the scheduled training. For further information refer to the Student Information Guide.

Verifying Your Past Qualifications

If you wish to claim National Recognition or Recognition of Prior Learning (RPL) for courses you have previously completed, please sign consent on the following page. I authorise MENTOR EDUCATION Pty Ltd, to collect use, disclose and store personal information about me for the purposes of enrolment and verifying my qualifications.

I agree not to assert any claims or cause of action of any kind against MENTOR EDUCATION Pty Ltd, their agents, clients, employees, and the individuals contacted by MENTOR EDUCATION Pty Ltd arising out of their qualification verification enquiry. I certify that all my qualifications are true

and correct.

Declarations

I declare that to the best of my knowledge all the information supplied in, and with this enrolment form is true and complete, I agree to abide by the conditions described in the Student Information Guide and in the terms and conditions contained therein. I consent to:

- The disclosure of personal information as described in the privacy statement.
- Mentor Education emailing me information in relation to its products and services.
- Mentor Education providing information to media, education, career and industry association partners for the purpose of providing you
 with industry eNewsletters, industry association membership, assist with you learning or suggesting other tools that can help with your
 professional and career development.
- Mentor Education using my course feedback

	I have read and understood the course guide provided to me with the units of competency and I understand the requirements for completion of this qualification.
	I have read, understood, and agree with these statements and conditions
Signature:	Date:

By entering my full name above, I understand and acknowledge that this constitutes a legally-binding digital signature.

11 Application Chec	:klist					
Before submitting your Student	: Enrolment Form ple	ase ensure:				
I have completed all que	stions required of me	e on the Student Enro	lment Form			
I have read and accepted	I have read and accepted the terms in the Declaration on the previous page					
I have provided a copy or or Medicare card)	I have provided a copy of one form of suitable identification (e.g., driver's licence, passport, birth certificate, or Medicare card)					
I have completed the pay	yment details in the p	payment form				
12 Payment Details						
Amount:						
Note: (Office use only)						
Choose your payment option						
Credit Card						
Visa	Mastercard	American E	xpress			
Card Number:			CVV:			
Cardholders Name:			VISA / MASTERCARD AMERICAN EXPRESS			
Expiry:			23 CVV 6000 0000 0000 0000 0000 0000 0000			
Signature:						
By entering my full name of Public Accountants to o			lly binding digital signature and I hereby authorise Institute mounts listed above.			
Electronic Funds Transfer (E	FT) is only for direct	payments, not payme	nt plans			
Electronic Funds Trans	sfer (EFT)					
Acc Name: Institute of		Transfer date:				
Bank: National Austra		Reference*:				
BSB Number: 083 054 Acc Number: 4645447		Reference".				
* For the reference, plea	se put RG146 + Your Sເ	ırname, eg. John Smith v	will have the reference: RG146SMITH			
IMPORTANT: Please ema	il confirmation of the tra	ansfer along with this en	rolment form to pathways@publicaccountants.org.au			
Please send the complete	ed payment form a	nd supporting doc	umentation to:			
Email	Fax	Mail				

Institute of Public Accountants, GPO Box 1637, Melbourne VIC 3001

(03) 8665 3130

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