

Certificate IV in Accounting (FNS40615)

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 license, 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 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 Residential Address

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:

Membership No.

Have you previously studied with Mentor Education*? (Previously known as RG146 Training Australia) Yes No

2 Unique Student Identifier (USI)

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

Your USI*:

3 Course and Modules

Note (Office use only):

Are you a new student to the Diploma of Accounting with us? Yes No
 If yes, a non-refundable application fee of \$150 will be charged.*

*The application fee is to cover the administrative work for processing multiple payments for your unit fees, setting up your student records, and organising credit transfer if applicable. This would be rebated to you in the form of full course enrolment discount if you pay the full course fee upfront.

Certificate IV in Accounting (FNS 40615)	Online	RPL
	Price	
Full Course Enrolment Discount Add the Certificate IV in Bookkeeping (FNS40215) as a dual qualification.	<input type="checkbox"/> \$1791 <input type="checkbox"/> \$135	<input type="checkbox"/> Yes <input type="checkbox"/> No

or

Group of Units	Price	RPL
AC 1 - Accounting Fundamentals	<input type="checkbox"/> \$628	<input type="checkbox"/> Yes <input type="checkbox"/> No
AC 2 - Business Reporting	<input type="checkbox"/> \$628	<input type="checkbox"/> Yes <input type="checkbox"/> No
AC 3 - BAS And Payroll	<input type="checkbox"/> \$314	<input type="checkbox"/> Yes <input type="checkbox"/> No
AC 4 - OHS, Inventory	<input type="checkbox"/> \$471	<input type="checkbox"/> Yes <input type="checkbox"/> No

or

Individual Unit	Price	RPL
AC 1 - Accounting Fundamentals		
FNSACC406 - Set up and operate a computerised accounting system	<input type="checkbox"/> \$157	<input type="checkbox"/> Yes <input type="checkbox"/> No
FNSINC401 - Apply principles of professional practice to work in the financial services industry	<input type="checkbox"/> \$157	<input type="checkbox"/> Yes <input type="checkbox"/> No
FNSBKG402 - Establish and maintain a cash accounting system	<input type="checkbox"/> \$157	<input type="checkbox"/> Yes <input type="checkbox"/> No
FNSACC301 - Process financial transactions and extract interim reports	<input type="checkbox"/> \$157	<input type="checkbox"/> Yes <input type="checkbox"/> No

AC 2 - Business Reporting		
BSBFIA401 - Prepare financial reports	<input type="checkbox"/> \$157	<input type="checkbox"/> Yes <input type="checkbox"/> No
FNSACC302 - Administer subsidiary accounts and ledgers	<input type="checkbox"/> \$157	<input type="checkbox"/> Yes <input type="checkbox"/> No
BSBITU306 - Design and produce business documents	<input type="checkbox"/> \$157	<input type="checkbox"/> Yes <input type="checkbox"/> No
FNSACC402 - Prepare operational budgets	<input type="checkbox"/> \$157	<input type="checkbox"/> Yes <input type="checkbox"/> No
AC 3 - BAS And Payroll		
FNSBKG405 - Establish and maintain a payroll system	<input type="checkbox"/> \$157	<input type="checkbox"/> Yes <input type="checkbox"/> No
FNSBKG404 - Carry out business activity and instalment activity statement tasks	<input type="checkbox"/> \$157	<input type="checkbox"/> Yes <input type="checkbox"/> No
AC 4 - OHS & Inventory		
BSBWHS201 - Contribute to health and safety of self and others	<input type="checkbox"/> \$157	<input type="checkbox"/> Yes <input type="checkbox"/> No
FNSACC405 - Maintain inventory records	<input type="checkbox"/> \$157	<input type="checkbox"/> Yes <input type="checkbox"/> No
FNSACC404 Prepare financial statement for non reporting entities	<input type="checkbox"/> \$157	<input type="checkbox"/> Yes <input type="checkbox"/> No
Units from Certificate IV in Bookkeeping (FNS40215) for dual qualifications		
FNSBKG401 - Develop and implement policies and procedures relevant to bookkeeping activities	<input type="checkbox"/> \$157	<input type="checkbox"/> Yes <input type="checkbox"/> No
FNSBKG403 Establish and maintain an accrual accounting system (Prerequisite is FNSBKG402)	<input type="checkbox"/> \$157	<input type="checkbox"/> Yes <input type="checkbox"/> No

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 It was a requirement of my job
 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 disability, impairment or long-term condition*? Yes No

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*? Yes No

Did you complete Year 12 in Australia*? Yes, what year? No

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 others
 Full-time employee
 Employer
 Unemployed - seeking full-time work
 Part-time employee
 Employed - unpaid worker in a family business
 Not employed - not seeking employed
 Unemployed - seeking part-time work

10 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, 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 Checklist

Before submitting your Student Enrolment Form please ensure:

I have completed all questions required of me on the Student Enrolment Form

I have read and accepted the terms in the Declaration on the previous page

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 payment details in the payment form

12 Payment Details

Amount:

Note:
(Office use only)

Choose your payment option

Credit Card

Visa

MasterCard

American Express

Card Number:

CW:

Cardholders Name:

Expiry:

Signature:



By entering my full name above, I acknowledge that this constitutes a legally binding digital signature and I hereby authorise Institute of Public Accountants to charge my credit card for the enrolment in the amounts listed above.

Electronic Funds Transfer (EFT) is only for direct payments, not payment plans

Electronic Funds Transfer (EFT)

Acc Name: Institute of Public Accountants Transfer date:

Bank: National Australia Bank

BSB Number: 083 054

Reference*:

Acc Number: 464544727

* For the reference, please put CIVACCTG + Your Surname, eg. John Smith will have the reference: CIVACCTGSMITH

IMPORTANT: Please email confirmation of the transfer along with this enrolment form to pathways@publicaccountants.org.au

Please send the completed payment form and supporting documentation to:

Email

pathways@publicaccountants.org.au

Fax

(03) 8665 3130

Mail

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