



# **DIPLOMA & CERTIFICATE ENROLMENT APPLICATION**





# DIPLOMA & CERTIFICATE ENROLMENT APPLICATION

I.M3

I am enrolling in the:

**Diploma in Packaging Technology**

**Certificate in Packaging**

Please send invoice for:

**FULL PAYMENT**

**SPLIT PAYMENT**

## PERSONAL DETAILS

Prof/Dr/Mr/Mrs/Ms/Miss

Given names  Last name

Date of Birth  *\*This is a mandatory field required by the PIABC in the UK*

Work phone  Home phone  Mobile

Email (work)

Email (home)

## PRIVATE ADDRESS

Street  City

State  Postcode  Country

## EMPLOYMENT DETAILS (CURRENT)

Job Title

Company Name

## WORK ADDRESS

Street  City

State  Postcode  Country

Please tick your preferred address for receipt of educational material.

HOME

WORK



# DIPLOMA & CERTIFICATE ENROLMENT APPLICATION



## ACADEMIC RECORD

School (list subjects and level attained)

## POST SCHOOL RECORD

List subjects and level attained

University

Degree(s)

Diplomas

Certificates

Trade qualifications

Non Certificate courses

## EMPLOYMENT RECORD

List chronologically indicating the duration of each appointment

1. Company

Position

Dates of Employment

2. Company

Position

Dates of Employment

3. Company

Position

Dates of Employment



# DIPLOMA & CERTIFICATE ENROLMENT APPLICATION

I.M3

**Packaging Experience (indicate your current packaging knowledge/experience)**

## REGISTRATION

**You will be registered as a candidate with the PIABC for all examinations and assessments. This is valid for two to three years. If you have not completed your chosen course, you will be required to re-register with the PIABC (additional fees may apply).**

**Certificate in Packaging students will receive 2x years complimentary membership to the AIP. Diploma in Packaging Technology students will receive 3x years. If you have not completed the course within this allotted time you will be sent a membership renewal invoice as all students are required to maintain their AIP Membership to complete the course.**

- (i)  I am already a member of the Australian Institute of Packaging.
- (ii)  I am NOT a member and have enclosed a completed application for admission to the Australian Institute of Packaging.
- (iii) Please send all correspondence regarding the course to:
- Private address
- Business address

## DISABILITY CODES

- Learner considers themselves to have a learning difficulty and/or disability.
- Learner does not consider themselves to have a learning difficulty and/or disability.
- No information provided by the learner.

*\*This is a non-mandatory field required by the PIABC UK*

Applicant Signature

Date

(Digital signature is accepted)



# DIPLOMA & CERTIFICATE ENROLMENT APPLICATION



## OFFICE USE ONLY

### ENROLMENT

Diploma  Date   
Certificate  Date   
Tutor  Appointed

### EXAMINATION RECORD

#### Diploma - Examinations

1.  Date   
2.  Date   
3.  Date   
4.  Date   
Completion date   
Award date received  Certificate No

### CERTIFICATE-EXAMINATIONS

#### Mandatory Unit Specialist Options

Date   
1.  Date   
2.  Date   
3.  Date   
4.  Date   
Completion date   
Award date received  Certificate No



**+61 7 3278 4490**

**info@aipack.com.au**

**www.aipack.com.au**