

# Course Application Form

Fee for Service Courses



## Personal Details

Title:  Mr / Mrs / Miss / Ms Date of Birth:  \_\_\_ / \_\_\_ / \_\_\_

Given Name:  Surname:

Gender:  Male  Female Home Ph:

Work Ph:  Mobile:

Email:

Address:

Suburb:  State:  Postcode:

## Course Details

Course Name:

Please note: Not all locations and delivery modes are available for all courses.  
Check our website for details specific to the course you are applying for.

Location:  Penrith  Sydney CBD  Tuggerah  Campbelltown  Liverpool  Not applicable

Delivery Mode:  Classroom  RPL  Distance/ Workplace  Other: \_\_\_\_\_

**Please provide details of your work experience and qualifications.  
Complete the tables below or attach copies of your resume and qualifications.**

List any qualifications and/or courses you have successfully completed			
Qualification/Course Name	Training Provider	Year Completed	Australian or Overseas?

Provide details of your work experience		
Positions held	Company names	Dates

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Of the following categories, which best describes your main reason for undertaking this course?

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> To get a job                         | <input type="checkbox"/> To get a better job or promotion | <input type="checkbox"/> To start my own business            |
| <input type="checkbox"/> To develop my existing business      | <input type="checkbox"/> It is a requirement of my job    | <input type="checkbox"/> To get into another course of study |
| <input type="checkbox"/> To try for a different career        | <input type="checkbox"/> I want extra skills for my job   | <input type="checkbox"/> Other reasons                       |
| <input type="checkbox"/> For personal interest or development |   |  |

In further detail, list your reasons for undertaking this course.


Do you have access to a computer and the Internet for the purposes of completing course assessments?

- Yes     No

How did you find out about the course?

- |  |  |
|--|--|
| <input type="checkbox"/> Job Services Australia Provider | <input type="checkbox"/> Newspaper Advertisement |
| <input type="checkbox"/> Benchmark Newsletter            | <input type="checkbox"/> Internet Search         |
| <input type="checkbox"/> Word of Mouth                   | <input type="checkbox"/> Employer                |
| <input type="checkbox"/> Benchmark Website               | <input type="checkbox"/> Other _____             |

## Payment

Select from the list below:

- I have enclosed a cheque or money order
- I have paid by direct deposit & emailed the transaction receipt
- I have completed my credit card details below

Direct Deposit details:

ANZ Bank  
BSB: 012-429    A/C #: 8416-74536  
A/C Name: Benchmark Resources Pty Ltd  
If paying by direct deposit, please enter your name in the reference field & email the transaction receipt to [accounts@benchmark.edu.au](mailto:accounts@benchmark.edu.au)

Credit Card Payment Authorisation

Visa, Bankcard or MasterCard

Card Number: \_\_\_\_\_    Expiry: \_\_\_\_ / \_\_\_\_    Amount: \$ \_\_\_\_\_

Name on Card: \_\_\_\_\_    Verification Code (last 3 digits): \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_    Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## Declaration

I verify that all information is true and correct and I provide consent for this information to be used by Benchmark College for enrolment and auditing purposes.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**PLEASE SUBMIT COMPLETED FORM  
WITH PAYMENT & IDENTIFICATION**

Fax: 02 4722 3599    Email: [info@benchmark.edu.au](mailto:info@benchmark.edu.au)  
Post: PO Box 4098 Penrith NSW 2750