

MORLING COLLEGE LTD.

SOUTHLAND COLLEGE
120 Herring Rd. MACQUARIE PARK NSW 2113
PHONE: (02) 9878 0201 FAX: (02) 9878 2175
E-MAIL: info.southland@morling.edu.au
WEBSITE: www.southland.edu.au

ENROLMENT DEADLINE: 25 June 2010

Master of Education Graduate Diploma of Education Master of Education (leadership)
Post-Graduate Enrolment Form — Semester 2, 2010

Please print this form, fill it in, and send it by post or as a scan attached to an email. Please do NOT try to fill this form out electronically.

Morling College is the degree-granting authority and principal accrediting agent for this course. Morling College policies require that we obtain consent from students to collect, use and disclose personal information. Morling College will collect information that is necessary to provide you with proper instruction and support. With your consent, Morling College will use and disclose this information for purposes such as class lists to our lecturers and your fellow students or where legally required to produce records. You are entitled to access your files upon request. If you require further information, please contact the Registrar.

TITLE (please tick one): Mr <input type="checkbox"/> / Mrs <input type="checkbox"/> / Miss <input type="checkbox"/> / Dr <input type="checkbox"/> / Rev <input type="checkbox"/> / Other:	
SEX: MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>	
FULL NAME (please print):	
FULL POSTAL ADDRESS:	
.....	
FULL NAME & ADDRESS OF EMPLOYMENT:	
.....	
HOME PHONE: (.....)	MOBILE:
WORK PHONE: (.....)	FAX:
E-MAIL: (.....)	DATE OF BIRTH:

NEW STUDENTS (those enrolling for the first time in this course) MUST fill in the remainder of this page.

ACADEMIC QUALIFICATIONS Degree/Diploma	Number of Years of Study & Mode		Institution	Year Completed
	Part-time	Full-time		

TEACHING EXPERIENCE	Primary	Secondary
Numbers of years of teaching:		
Other Relevant Professional Experience:		
.....		
.....		
<p>N.B. — Recognition of Prior Learning: Consideration may be given to granting credit for work completed elsewhere. Please send an email to info@southland.edu.au requesting an Application Form for RPL if this applies to you.</p>		

ADDITIONAL REQUIREMENTS

What is a Certified Copy? – To create a “certified” copy, make a copy of the original document, then show the copy AND the original to a trustworthy other person, such as a Justice of the Peace or your School Principal, who should write on the copy these words: ‘I have viewed the original, of which this is a copy, and declare this to be a true copy of the original’ and then write his/her name clearly and sign the copy. This proves the copy is real.

- **NEW STUDENTS:** send photograph and supporting certified documents as hard copies by POST; do not send them as scans attached to an email.
 - ◆ **Certified copies of all relevant documentation** i.e. transcript and testamur of relevant undergraduate study
- Please do not send original documents because these will not be returned. All photocopies must be certified (see explanation above).
- ◆ A Passport size photo
 - ◆ Send the **New Student Reference Questionnaire** (*attached*) to your **Pastor** or **Principal**
- **ALL STUDENTS:**
 - **Unit Tuition Fee:** (*will be refunded if an enrolment is not successful.*) See the Unit Selection Page for payment details.

ALL STUDENTS MUST COMPLETE THIS SECTION

DEEWR requires the following information to improve data gathering on socioeconomic status (*Advancing Equity and Participation in Higher Education study, 2007*).

1a. What was the highest level of education completed by your parent/guardian #1? <i>(place tick or cross in the appropriate box):</i>	2a. What was the highest level of education completed by your parent/guardian #2? <i>(place tick or cross in the appropriate box):</i>
1. <input type="checkbox"/> Postgraduate qualifications (e.g. Masters, PhD) 2. <input type="checkbox"/> Bachelor qualification 3. <input type="checkbox"/> Other post-school qualification (eg, VET/TAFE certificate, apprenticeship, associate degree or diploma) 4. <input type="checkbox"/> Completed Year 12 or equivalent 5. <input type="checkbox"/> Did not complete Year 12 or equivalent 6. <input type="checkbox"/> Don't know 7. <input type="checkbox"/> Not applicable	1. <input type="checkbox"/> Postgraduate qualifications (e.g. Masters, PhD) 2. <input type="checkbox"/> Bachelor qualification 3. <input type="checkbox"/> Other post-school qualification (eg, VET/TAFE certificate, apprenticeship, associate degree or diploma) 4. <input type="checkbox"/> Completed Year 12 or equivalent 5. <input type="checkbox"/> Did not complete Year 12 or equivalent 6. <input type="checkbox"/> Don't know 7. <input type="checkbox"/> Not applicable
1b. Parent/Guardian #1 is: <input type="checkbox"/> Female / <input type="checkbox"/> Male	2b. Parent/Guardian #2 is: <input type="checkbox"/> Female / <input type="checkbox"/> Male

The following information is required in order to provide statistical information to the Commonwealth as part of Government reporting requirements.

Country of Birth:	Year of arrival in Australia (<i>if not born here</i>):
Language spoken at home:	
CITIZENSHIP STATUS (<i>please tick one only</i>) Australian citizen <input type="checkbox"/> Permanent Humanitarian Visa: <input type="checkbox"/>	Permanent resident: <input type="checkbox"/> New Zealand citizen <input type="checkbox"/> Temporary Visa (<i>e.g., student visa</i>) <input type="checkbox"/> ⇒ VISA sub-class
Other: <input type="checkbox"/> <i>please state:</i>	
Disabilities (<i>if any</i>):	
Please indicate if any of the categories below applies to you:	
Aboriginal <input type="checkbox"/>	Torres Strait Islander <input type="checkbox"/>
Overseas Student <input type="checkbox"/>	Offshore Student <input type="checkbox"/>
*An overseas student is studying while living in Australia under a Student Visa or other visa. **An Offshore Student is <u>not</u> an Australian citizen, and is <u>not</u> living in Australia.	
Tertiary Entrance Score (<i>if applicable; value will range from 30.00 to 99.85</i>):	

REGULATIONS

Overseas Students: "The information provided by overseas students to the provider (Morling College) may be made available to Commonwealth and State agencies and the Fund Manager of the Educational Services for Overseas Students (ESOS) Assurance Fund, pursuant to obligations under the ESOS Act 2000 and the National Code; and the provider is required, under section 19 of the ESOS Act 2000, to tell the Department about: (i) certain changes to the student's enrolment; and (ii) any breach by the student of a student visa condition relating to attendance or satisfactory academic performance". By signing this form I acknowledge that I have read, understand and accept the Morling College Refund Policy and Agreement for Overseas Students.

Variation of Enrolment: Students who wish to vary their enrolment by addition of or withdrawal from a unit should consult student information supplied by Morling College for the critical dates that apply to that unit and the variation procedure. After the Administrative Date and up to the Census Date of a unit, a Variation of Enrolment Fee applies. Withdrawal from a unit after the Withdrawal Date will normally attract a fail (FW) grade. [For more information, see <http://www.morling.nsw.edu.au>.]

Closing dates for application: An application for enrolment in a unit lodged after the Administrative Date for the unit shall be subject to the Variation of Enrolment Fee.

Re-crediting FEE-HELP balance: Candidates who withdraw after the census dates and wish to apply for re-crediting of their FEE-HELP balance must apply in writing to the Registrar of Morling College. A copy of the regulations for re-crediting FEE-HELP balances can be found on the Morling College website www.morling.nsw.edu.au.

DECLARATION:

I have read the regulations and certify that to the best of my knowledge the above details are correct. I understand that my personal information will be stored by the Department of Employment, Education and Workplace Relations (DEEWR) in order to administer my FEE-HELP assistance. I understand that: the information on this form is collected for program administration purposes, including the viewing of graduate survey data by relevant parties such as Graduate Careers Australia. Authority to collect this information is contained in the *Higher Education Support Act 2003*; information may be shared between the Australian Taxation Office, DEEWR and the Department of Immigration and Citizenship; and information may not otherwise be disclosed without my consent unless authorised or required by law. Graduates' names may be published on the Morling/Southland College and/or N.I.C.E. websites and official publications. I understand that I may request for my name not to be published. I understand that giving false or misleading information is a serious offence under the Criminal Code.

DECLARATION: *I declare that the information supplied on this form is to the best of my knowledge correct. If admitted to the course I agree to abide by the rules and regulations of Morling College.*

Signed: Date: / /

College Principal or Registrar: *I am satisfied that the above candidate has fulfilled the pre-requisites to enrol in the above units.*

College endorsement:

Do you expect to **COMPLETE GRADUATION REQUIREMENTS** in Semester 2, 2010? YES / NO

IF YES, please supply: your **height** in cm: & your **head circumference** in cm:
(for academic dress purposes)

AND, the **Award** with which you will graduate:

.....

OFFICE USE ONLY

Date Received

Approved by

Date Approved

Comments:.....
.....

MORLING COLLEGE

The Baptist Bible and Theological College of NSW

120 HERRING ROAD MACQUARIE PARK NSW 2113
Southland College PHONE: (02) 9889 1633
Southland College FAX: (02) 9889 1644
E-MAIL: info.southland@morling.edu.au
WEBSITE: www.southland.edu.au

Referee Report

Candidates should complete Section One and forward the report to their chosen referee to complete Section Two

Referees are requested to post this form directly to the Registrar at the address above.

Email enquiries may be directed to info@southland.edu.au

Section One: to be completed by the applicant

Applicant's name:

Address:

..... Postcode:

Contact telephone: Fax:

Course applied for:

Bachelor of Education (*Conversion*)

Graduate Diploma of Education

Master of Education

Master of Education (*Leadership*)

Referee's name:

Title and position:

Address:

..... Postcode:

Contact telephone: Fax:

Section Two: to be completed by the referee

To the Referee: You have been asked to give your own opinion of the personal, professional and academic qualities of the above-named applicant. Please scale the applicant realistically on the following qualities, and report any other characteristics, both positive and negative, which reflect their present capacity to undertake advanced study and work in teaching or a teaching related field. (Please note that a carefully prepared discriminatory report is liable to receive more weight than a uniformly positive one.)

1 Please indicate the basis on which you have formed these opinions of the applicant (including type of interactions and time period).

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2 Please circle the appropriate number. *If you do not know enough about their capacity in a particular area, please circle NK. There is an opportunity to qualify any answers below.*

	Excellent	Above average	Average	Below Average	Poor	Not known
Demonstrated commitment to good teaching practice [BEd (Conversion), Grad Dip Ed, MEd] or commitment to good leadership practices [MEd (Leadership)]	5	4	3	2	1	NK
Complexity and clarity of thought	5	4	3	2	1	NK
Ability to express complex ideas in clear, written English	5	4	3	2	1	NK
Fluency and clarity of spoken English	5	4	3	2	1	NK
Demonstrated openness to other's ideas	5	4	3	2	1	NK
Ability to take personal responsibility for good quality relationships	5	4	3	2	1	NK
Personal maturity	5	4	3	2	1	NK
Ability to manage high stress	5	4	3	2	1	NK
Ability to negotiate conflict	5	4	3	2	1	NK
Ability to deal positively with criticism	5	4	3	2	1	NK
Powers of critical analysis	5	4	3	2	1	NK
Demonstrated initiative and self direction	5	4	3	2	1	NK
Ethical professional practices	5	4	3	2	1	NK
Understanding of Christian Education Ethos	5	4	3	2	1	NK

3 Please comment on the candidate's personal suitability for undertaking this course. (This might include an expression of answers above and other strengths and weaknesses.) Use a separate page if necessary.

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Signature: Date:.....

Thank you for your time and assistance