

GENERAL INFORMATION

This form must be completed by the student and the nominated proxy and presented by the nominated proxy when receiving program or enrolment information and when completing any part of the enrolment process on behalf of the student. A copy of this completed form must be attached to any enrolment paperwork submitted on behalf of the student. Your nominated proxy will be required to produce proof of their own identity (ie Drivers licence or other form of photo identification)

Please note your proxy cannot sign a 'Request for Commonwealth support and VET-HELP', 'Request for Commonwealth support and HECS-HELP' form or a 'Request for FEE-HELP assistance' form on your behalf, unless they have legal power of attorney. You should ensure you complete and sign your Commonwealth Support Request form beforehand and give it to your proxy to bring to enrolment.

SECTION A: PERSONAL DETAILS

Student ID <small>(if issued)</small>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Title	<input type="checkbox"/> MS	<input type="checkbox"/> MISS	<input type="checkbox"/> MRS	<input type="checkbox"/> MR	<input type="checkbox"/> DR	Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male
Family Name	<input type="text"/>			Given Name(s)	<input type="text"/>		
Course Code	<input type="text"/>						
Course Title	<input type="text"/>						
Are you an international student?	<input type="checkbox"/> YES <input type="checkbox"/> NO						

SECTION B: STATEMENT BY STUDENT

I _____ authorise
(Name of student)

_____ to act as my proxy for enrolment in the above course.
(Full Name of Proxy)

I accept full responsibility for all actions carried out on my behalf by my authorised proxy (including decisions related to fees). I also undertake to ensure my enrolment has been satisfactorily completed prior to the relevant census date. The person named below has agreed to provide me with copies of relevant enrolment paperwork. I acknowledge that while I am an enrolling student I am subject to the published statutes, regulations, policies and procedures of William Angliss Institute. I am aware my enrolment details can be checked at myWAI available at www.angliss.edu.au

Signature of Student Date

SECTION C: STATEMENT BY PROXY

I _____ am prepared to act as a proxy for the above student
(Full Name of Proxy)

for the purpose of enrolment and agree to pay all enrolment related fees on behalf of the student

Signature of Proxy Date

Office use only (To be completed by WAI Staff)

<input type="checkbox"/> Identification of Proxy sighted	_____	_____	_____	Date Stamp and Comments
	<small>WAI Information Centre Staff Signature</small>	<small>Staff Number</small>	<small>Type of ID and Number</small>	