

Minerva Private Academy- Application For Enrolment for ADULT Learners	
Name:	
Address:	
Contact Number:	
Email:	
Date of Birth/Age:	
Gender:	
Country of Birth:	
Visa Status:	
Languages Spoken:	
Main Language Spoken at Home:	
Previous Education:	
Course:	
Course Duration:	
Commencement Date:	

Emergency Contact:	
Name:	
Relationship:	
Contact Number:	
Email:	
Address:	

Application to Enrol	
I hereby apply to enrol in the following program/ course:	
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I understand that supplying false or incorrect information on this form may lead to the reversal of a decision to approve enrolment. The information I have provided on this form is true and correct in every particular, to the best of my knowledge.	
Signature:	
Date:	

Office Use Only			
Enrolment Decision	Has the prospective student been accepted for enrolment?	Yes	No (Applicant advised in writing)
	If no, indicate the reason. *Does not meet the Academy Enrolment Eligibility/ Program Eligibility requirements. *Does not meet age eligibility requirements. *Prospective student is subject or has been subject to suspension or disciplinary action from another school. *The Academy does not offer year-level appropriate prospective lessons/ activities the student is seeking to be enrolled in. *The Academy has no remaining class/program allocations for the period the student is seeking to be enrolled in. *The Academy maintains the discretion to decline applications without providing an explanation.		
Date Enrolment Processed			
Birth Certificate/Passport Sighted. Number Recorded. DOB Confirmed	Yes	No	Number:
Visa & Associated Documents Sighted	Yes	No	Details: