



TRINITY  
THEOLOGICAL COLLEGE

"Preparing People for Effective Christian Service"

## Audit Enrolment Form

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Phone \_\_\_\_\_ Mobile \_\_\_\_\_

Spouse's Name \_\_\_\_\_

Email \_\_\_\_\_

Name of Children \_\_\_\_\_

Church Attending \_\_\_\_\_

Date of Birth \_\_\_\_\_

Citizenship \_\_\_\_\_

(Circle Yes/No)

Prior Study Yes / No

Completed Year 12 Yes / No

TAFE/ Certificate course Yes / No

University Degree level Yes / No

University Post Grad level Yes/ No

Course                      Non Award                          Bachelor of Theology

### UNIT ENROLMENT

Please enrol me in the following unit/s as an audit student (i.e. I will attend the lectures but I am not required to submit the assessment pieces or sit the exam.)

Unit Number	Unit Name	Year/ Semester e.g. 2008/1

I wish to use the Crèche for my child/ren (names and date of birth)

Wednesday

morning \_\_\_\_\_

Friday

morning \_\_\_\_\_

Student's signature \_\_\_\_\_ Date \_\_\_\_\_

Office Use Only

TAMS \_\_\_\_\_ TSM \_\_\_\_\_ MYOB \_\_\_\_\_ Library \_\_\_\_\_

Registrar's Signature: \_\_\_\_\_ Date: \_\_\_\_\_