



Web [www.smartacademy.edu.au](http://www.smartacademy.edu.au) Email [info@smartacademy.edu.au](mailto:info@smartacademy.edu.au)

# REAL ESTATE ENROLMENT FORM

Please complete and return to  
Level 4 / 1 Horwood Place  
Parramatta, NSW 2150

Tel 02 9891 4411 Fax 02 9891 4655

Mr/Mrs/Ms Surname \_\_\_\_\_ First Name \_\_\_\_\_

Date of Birth: \_\_\_\_\_  Male  Female

Postal Address \_\_\_\_\_

Suburb \_\_\_\_\_ Postcode \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_ Mobile \_\_\_\_\_

Fax \_\_\_\_\_ Email: \_\_\_\_\_

Smart Academy Student No (if known) \_\_\_\_\_

How did you learn about Smart Academy? \_\_\_\_\_

Do you wish to receive information about future College courses and events?  Yes  No

Consultant Name
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Please enrol me in the following course (courses)

Course Name	Fee	Select
Real Estate Licensing Course	\$3,000	<input type="checkbox"/> Distance <input type="checkbox"/> Start Date* _____
Real Estate Certificate	\$595	<input type="checkbox"/> Distance <input type="checkbox"/> Start Date* _____
Real Estate CPD (Please specify topic)	\$250	<input type="checkbox"/> Distance <input type="checkbox"/> Start Date* _____
<b>Total Fee</b>		

- \*1. If you do not select a start date you will be enrolled into the next available course.'
- 2. If you are enrolled in a class paced, moderated course you are expected to complete the readings and activities for that week only until instructed to move on by your instructor.

Payment method  
 Cash  Cheque  Visa  Mastercard  Bankcard  Amex

Card Number \_\_\_\_\_

Name on Card \_\_\_\_\_ Expiry date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

## A GOVERNMENT REQUEST

The Federal Government asks all Colleges to collect the following statistics - to help their educational planning.

This data must be provided for all programs that attract Government support.

**You will not be identified with the statistics.**

We appreciate your taking the time to answer these brief questions.

### 1 Are you of Aboriginal or Torres Strait Islander origin?

(For persons of both Aboriginal AND Torres Strait Islander origin, mark both 'Yes' boxes)

- No  Yes, Aboriginal
- Yes, Torres Strait Islander

### 2 In which country were you born?

- Australia
- Other - please specify \_\_\_\_\_

### 3 Do you speak a language other than English at home?

- No, English only GOTO QUESTION 5
- Yes, other - please specify \_\_\_\_\_

### 4 How well do you speak English?

- Very well  Not well
- Well  Not at all

### 5 Of the following categories, which BEST describes your current employment status? (Tick ONE box only)

- Full-time employee
- Part-time employee
- Self employed - not employing others
- Employer
- Employed - unpaid worker in a family business
- Unemployed - seeking full-time work
- Unemployed - seeking part-time work
- Not employed - not seeking employment

### 6 What is your highest COMPLETED school level?

- Completed Year 12
- Completed Year 11
- Completed Year 10
- Completed Year 9 or lower

### 7 In which YEAR did you complete that school level?

### 8 Are you still attending secondary school?

- Yes  No

### 9 Have you SUCCESSFULLY completed any of the following qualifications?

- Yes  No
- If Yes, then tick ANY applicable boxes**
- Bachelor Degree or Higher Degree
- Advanced Diploma or Associate Degree
- Diploma (or Associate Diploma)
- Certificate IV (or Advanced Certificate/Technician)
- Certificate III (or Trade Certificate)
- Certificate II
- Certificate I
- Certificates other than the above

### 10 Do you consider yourself to have a disability, impairment or long-term condition?

- Yes  No

**If Yes, then please indicate the areas of disability, impairment or long-term condition:**

(You may indicate more than one area)

- Hearing/Deaf  Acquired Brain Impairment
- Physical  Vision
- Intellectual  Medical Condition
- Learning  Other
- Mental Illness