



Professional Certificate in Quality Improvement in Healthcare (ZPQIH) Enrolment Form

Please retain a copy of this form and return with your payment details to the Enrolment Form Return options on the last page of this form.

Course Enrolment *(please tick to confirm course enrolment)*

- Clinical Practice Guidelines (SCHLS 90018)
- Performance Review and Health Economics (SCHLS 90019)
- Qualitative Research Methods for Quality Improvement in Healthcare (SCHLS 90017)

PLEASE NOTE: A minimum number of enrolments are required for courses to run. Please ensure that you have confirmation of course commencement before you book flights and accomodation for the on campus workshops.

Enrolment and Contact Details

Please complete all fields

Title	
Family Name	
Given Name(s)	
Mailing Address	
Suburb / Town	
Post Code & State	
Date of Birth <small>(required for network access log on)</small>	
Phone	()
Fax	()
Mobile	
Email	
Professional qualifications	1. Provide a copy of your resume. 2. Provide a copy of your undergraduate degree. 3. Provide a copy of your current employment details.

Fees

Clinical Practice Guidelines:	\$2200.00 (GST inclusive)
Performance Review and Health Economics:	\$2200.00 (GST inclusive)
Qualitative Research Methods for Quality Improvement in Healthcare:	\$2200.00 (GST inclusive)
Total fees:	\$4400.00 (GST inclusive)

Please note, fees will be processed at course start date

Payment options

Please use only one method of payment

Cheque

I enclose a cheque for \$..... made payable to **University of South Australia**

Please attach your cheque to the enrolment form and mail to address noted below.

Credit Card

Please debit my credit card to the value of \$.....	
Please Debit	<input type="checkbox"/> Visa / <input type="checkbox"/> MasterCard
Card Number	_____ _____ _____ _____
Expiry Date	___/___
Name on Card	
Cardholder Signature	
Today's Date	___/___/___

Note For GST Purposes

The Australian Business Number (ABN) for the University of South Australia is 37 191 313 308.
Please regard this Enrolment form as a course offer.
Cheque and Credit Card payments: a copy of this form should be retained for taxation purposes.

Refund Policy

Up to course commencement: 85% refund.
From course commence date: no refund. However, a substitute person from the same organization may be nominated

Enrolment Form Return Options

Completed Enrolment Form with signed credit card details to:

Attention: Professional Certificate in Quality Improvement in Healthcare

Email

healthstudy@unisa.edu.au

Fax

Fax (08) 8302 2853

Mail

Completed Enrolment Form with cheque or signed credit card details to:

Professional Certificate in Quality Improvement in Healthcare

University of South Australia

School of Health Sciences (IPC CEA-14)

GPO Box 2471

Adelaide SA 5001

For course enquiries

Please contact the School of Health Sciences

Email: healthstudy@unisa.edu.au

Web: <http://www.unisa.edu.au/Health-Sciences/Programs-and-Courses/Short-courses/>