

Association of Professional Engineers, Scientists and Managers Australia
and La Trobe University
Re-Enrolment Form—Study Period 2, 2010



Please complete each field below.

Student Number:						
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PERSONAL DETAILS

Title:	Name:	Surname:
Gender: <i>(please circle)</i> : Male Female		Date of Birth (compulsory):
Position:		
Employer:		
Division:		
Daytime Telephone:		Home Telephone:
Fax (daytime) :		Mobile:
Email (compulsory):		

** Overseas students must provide us with a street address to allow delivery of your study material by courier. Failure to do so will result in delivery of your material by post, which will cause delays.

EMPLOYER ADDRESS

Address:		
Suburb:	State:	Postcode:
Country (if not Australia):		

HOME ADDRESS

Address:		
Suburb:	State:	Postcode:
Country (if not Australia):		

ENROLMENT INFORMATION

Mail Preference: <i>(please circle)</i> : Employer Residential			
Exam Location <small>(refer http://www.mba-distance-learning.com/exam_centres.asp)</small>			
Is your employer paying for, or reimbursing you for your course fees? <i>(please circle)</i>	No	Yes, Part	Yes, All
What program are you enrolled in? <small>(e.g. Graduate Certificate of Management)</small>			
Are you a member of:	<input type="checkbox"/> ACS <input type="checkbox"/> AIPM <input type="checkbox"/> ALIA	<input type="checkbox"/> AUSIMM <input type="checkbox"/> BOM <input type="checkbox"/> CPSU	<input type="checkbox"/> IPENZ <input type="checkbox"/> PIA <input type="checkbox"/> MDPI
By selecting one of these professional memberships, you will be eligible to claim the corporate affiliate fee.			

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Student Name:

Student No :



UNITS

(please tick the unit number/s you wish to undertake in Study Period 2, 2010)

- | | |
|--|---|
| 101 Financial Management
102 Management Perspectives
201 Economic Decision Making
202 Business Law
301 Research Project
302 Employer Based Unit
303 Project Management
305 Operations Management
306 Strategic Management
307 Management of Professional Services
308 Managing for Innovation
401 Marketing | 402 Contemporary People Management
403 Managing Information Systems
406 Corporate Finance
407 International Business Strategy
410 Strategic Management in Services
415 Engineering Risk Management
416 Corporate Sustainability
423 e-Business Strategy
431 Leaders as Decision Makers
501 Advanced Project Management
602 The Australian Healthcare and Pharmaceutical Environment |
|--|---|

PAYMENT DETAILS

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- I enclose a cheque for AUD\$ (Cheques made payable to CBS Pty Ltd)
- OR** Please find attached my completed FEE-HELP Application
- OR** Please debit my credit card: AUD\$ Amount:
- Visa MasterCard Diners American Express

Card No:

Expiry date: ____ / ____

Cardholders' Name:

Cardholders' Signature:

Please complete and return to the address or fax below:			
Postal:	GPO Box 1272, Melbourne, VIC, 3001, Australia	Courier:	Level 4 163 Eastern Road, South Melbourne, VIC, 3205, Australia

Telephone:	+ 61 3 9695 8855	Fax:	+61 3 9695 8901
Website:	www.mba-distance-learning.com	Email:	mba@chifley.edu.au

Office use only Date banked: Client no: