



**PROFESSIONAL DEVELOPMENT SHORT COURSE
GROUP APPLICATION FORM**

Course name

Course fee*

Agreement

By submitting this form, you are agreeing that you have notified each individual group member of the following:

- Each individual group member understands that they may be required to complete assessment tasks for this unit, and also understands that any marks they receive for these tasks will not at any time appear on any academic transcript, nor will this unit count towards a degree. Each group member will undertake to find out the assessment requirements from the unit coordinator.
- Each individual group member understands that as a professional development/short course student they are not formally enrolled in an award course at the University of Sydney. They understand that they will not have full access to University of Sydney Library services, such as off-campus access to licensed electronic resources (eg databases, journal articles and eBooks). Each group member also understands that the coordinator of their course may organise access to alternative learning resources if this is required.
- Each individual group member understands that as a professional development/short course student they can access licensed electronic resources by visiting any University of Sydney Library in person; and they can acquire a short-term community access library card that provides on-campus access to borrowing collections at the University of Sydney Library (\$40 AUD 3-month access per person).

Group fees

For a group of participants from the same institution or organisation, the following discounts apply:

- 3-4 participants: 10% discount
- 5 or more participants: 20% discount

Payment

Visa

Mastercard

Card number

Name on card

Expiry date

Amount (\$AUD)

Signature

Date

Submit to

Office for Teaching and Learning
Room 329, Sydney School of Public Health, Edward Ford Building (A27)
The University of Sydney NSW 2006

sph.enquiries@sydney.edu.au

Fax: +61 2 9036 6247

**Course fees are subject to change*

Invoice information

Customer/Company name

Contact name

Address

Suburb

State

Postcode

Country

Email

Phone

Fax

Individual group member details

Title	First name	Last name	Date of birth	Address	Phone	Mobile	Email