

ORDER FORM – Outside School Hours Care Qualifications



Name of Student: _____ Phone: _____

Delivery address (email or post): _____

Please note: Refer to your Study Plan before making a selection. If this is your first unit, please select the unit at the top of the list

Certificate III in Children's Services (Outside School Hours Care)	Mode of study Please tick your mode of delivery. See explanation * for details				Subtotal
	eLearning	Workbook	RPL	Bridging unit	
Cost per module	\$140	\$140	\$100	\$25	
CHCIC301D	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCCN301A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCCN302A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCCN303A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCCS400A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCCHILD401A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
HLTOHS300A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCFC301A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCPR301A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCPR303D	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
HLTHIR403B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCOSH401A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCOSH402A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCOSH403A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Enrolment Fee	New Student			\$100	
Re-Enrolment Fee	Previous student			\$50	
TOTAL AMOUNT					\$

Certificate IV in Children's Services (Outside School Hours Care)	Mode of study Please tick your mode of delivery. See explanation * for details				Subtotal
	eLearning	Workbook	RPL	Bridging unit	
Cost per module	\$140	\$140	\$100	\$25	
CHCCN301A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCCN303A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCCS400A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCCHILD401A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCFC301A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCPR301A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
HLTOHS300A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCOSH401A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCOSH402A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCOSH403A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
HLTHIR403B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCORG303A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCPR502D	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCPR509A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCORG428A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Enrolment Fee	New Student			\$100	
Re-Enrolment Fee	Previous student			\$50	
TOTAL AMOUNT					\$

Diploma of Children's Services (Outside School Hours Care)	Mode of study Please tick your mode of delivery. See explanation * for details				Subtotal
	eLearning	Workbook	RPL	Bridging unit	
Cost per module	\$150	\$150	\$100	\$25	
CHCCN511A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCFC512A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCFC513A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCFC514A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCFC515A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCIC501A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCIC510A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCIC512A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCPOL504A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCPR510A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCRF511A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCORG506C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCIC511A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCCN520C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BSBMGT608B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCCS502A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCORG520C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHCORG624C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Enrolment Fee	New Student			\$100	
Re-Enrolment Fee	Previous student			\$50	
TOTAL AMOUNT					\$

Bridging units		
Module Code	Cost per unit	Subtotal
BU41208A	\$140	
BU41208B	\$140	
BU41208C	\$140	
TOTAL AMOUNT		\$

Middle Childhood Skill Set		
Module Code	Cost per unit	Subtotal
CHCFC512A	\$150	
CHCFC513A	\$150	
CHCFC514A	\$150	
CHCFC515A	\$150	
TOTAL AMOUNT		\$

Payment Details

I confirm the above order is correct and wish to pay for this by:

- Please deduct the amount listed in 'Total amounts' from my EziDEBIT account
- Payment Enclosed: \$ _____ (please make cheques/money order payable to ACCCO. Do NOT post cash)
- I am on a contract/ funded scheme. If so, which one: _____
- Please charge my credit card as follows: Total Amount: \$ _____
 Credit Card Type: MasterCard Bankcard Visa
 Credit Card Number: _____ / _____ / _____ / _____ Expiry Date: ____/____
 Name of Cardholder: _____ Authorised Signature: _____

* Explanation of mode of study:

eLearning: Access to the unit is given on our eLearning console through our website. This forms a part of external study. For more information about eLearning, please refer to: <http://www.accco.com.au/students/elearning/>

Workbook: Students will be posted a workbook to complete their study. For more information this type of study, please refer to: <http://www.accco.com.au/students/external/>

RPL (Recognition of Prior Learning): This involves assessment of existing skills and knowledge only. No training is provided. For more information on RPL and conditions for enrolment, please consult www.accco.com.au/students/rpl/

Bridging unit: Students may only order Bridging RPL's if "Bridging Only" appears next to this unit on their individual study plan. Bridging RPLs mean a similar unit has been completed within a previous training package.

Please post with payment (if applicable) to: ACCCO, PO Box 1108, Fortitude Valley QLD 4006 or fax to (07) 3257 1872 or email reception@accco.com.au

Office Use Only: Date Received: ____/____/____

Date posted / emailed / accessed: ____/____/____

Verified: _____ (Initials)