



Elementary Medical Terminology Enrolment Form

Personal Details

HIMAA Student Code (if previously enrolled)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Title	<input type="text"/>	Given Names	<input type="text"/>				
Family Name (Surname)	<input type="text"/>						
<input type="checkbox"/> Female	<input type="checkbox"/> Male	Date of Birth	<input type="text"/> / <input type="text"/> / <input type="text"/>				

Residential Address

Building / property name	<input type="text"/>						
Flat / unit details	<input type="text"/>			Street or lot number (eg. 20 or Lot 20)	<input type="text"/>		
Street name	<input type="text"/>						
Suburb, locality or town	<input type="text"/>						
State / Territory	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>		

Postal Address (if different from above)

Building / property name	<input type="text"/>						
Flat / unit details	<input type="text"/>			Street or lot number (eg. 20 or Lot 20)	<input type="text"/>		
Street name	<input type="text"/>						
Postal information eg. PO Box	<input type="text"/>						
Suburb, locality or town	<input type="text"/>						
State / Territory	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>		

Contact Details

Home Phone incl area code	<input type="text"/>	Work Phone incl area code	<input type="text"/>
Mobile	<input type="text"/>	Preferred email	<input type="text"/>

Enrolment informationIntakes open on the 1st of the month close on the 5th of the month. (please tick ✓ one box)Feb Mar Apr May June July Aug Sept Oct Nov Dec **Payment MUST accompany enrolment form unless an invoice is required by your organisation***All fees include GST*

<input type="checkbox"/> Non-Member full payment	\$500.00
<input type="checkbox"/> Financial Member (HIMAA) full payment	\$450.00

 Cheque or money order payable to *Health Information Management Association of Australia Limited* EFT payment – for banking details phone 02 9887 5898 or email education@hima.org.au MasterCard Visa American Express

Please note a surcharge of 1.8% applies to payments by credit card

Card no. Expiry date /

Cardholder _____

Signature _____

Organisation _____
(If business credit card) Please invoice my organisation. Billing details (if different to the business address on page 1)

Contact _____ Phone () _____

Organisation _____

Billing Address _____

email _____

Where to send your enrolment form and paymentStudent Support and Administration Officer Education Services
Locked Bag 2045 North Ryde NSW 1670

Phone 02 9887 5898

Fax 02 9887 5895

email education@hima.org.auIf sending by courier please use our street address:
Level 1, 51 Wicks Road North Ryde NSW 2113

Filename: Enrolment Elementary Medical Terminology	Page 2 of 4
Version 4.0	Date for review: December 2020
	Release date: December 2019

Your enrolment will not be processed until receipt of this signed Student Agreement

STUDENT AGREEMENT

I agree to comply with the policies and procedures of the Health Information Management Association of Australia Limited (HIMAA) as published on the Education Services website. These policies and procedures include but are not limited to

Recognition of Prior Learning (RPL)

I understand that HIMAA supports the process of RPL for students who have undertaken appropriate studies or work experience and who can provide evidence of competency.

Enrolment

I understand that HIMAA reserves the right to decline my request to enrol in a course if my prior knowledge, skill or experience does not meet the prerequisite for the chosen course. HIMAA will counsel me regarding appropriate training or experience before exercising this right. I understand that my enrolment will not be processed until payment of the course fee.

Protection of fees paid on enrolment

I understand that all course fees paid in advance are protected and available for distribution

- if HIMAA cancels the course and I cannot be transferred to a similar course with HIMAA or another training provider the fees applicable to the unfinished portion of my course less an administration charge of \$280.00 will be refunded to me
- if I have difficulty competently completing the course requirements and, after discussion with me, HIMAA cancels my enrolment the fees applicable to the unfinished portion of my course less an administration charge of \$280.00 will be refunded to me.

Refund of fees after enrolment

I understand that

- if I cancel my enrolment before the course materials have been distributed HIMAA will refund the enrolment fee paid less an administration charge of \$280.00
- if I cancel my enrolment after the course materials have been distributed but within two months of the course commencement date and have submitted no more than two assessments HIMAA will refund 50% of the enrolment fee paid
- requests for refunds must be in writing to the Student Support and Administration Officer Education Services and all course materials distributed by Education Services must be returned before any refund is issued
- after discussion with me HIMAA reserves the right to cancel my enrolment at any time with or without a refund of fees.

Assessments

I will submit assessments as scheduled by Education Services and I will comply with the conditions for submission of assessments.

Assessment appeals procedure

If I am not satisfied with the result of an assessment I may appeal against the decision by contacting my Education Officer within seven days of receiving the assessment result.

Academic conduct

I must not receive assistance from a third party whether a manager or a colleague when completing the coursework or the assessments.

I will not use the words or ideas of others and present them as my own. I understand this is plagiarism which is unethical and will not be tolerated by Education Services.

I will not use another student's assessment or knowledge to complete assessments submitted as my own work. I understand this is cheating which will not be tolerated by Education Services.

Filename: Enrolment Elementary Medical Terminology	Page 3 of 4
Version 4.0	Date for review: December 2020
	Release date: December 2019

If I am found to be submitting another person's work as my own, my enrolment will be cancelled immediately without any refund and future enrolments will not be accepted in any courses or workshops conducted by Education Services.

If the person assisting me with the assessment is a past or current student and it is proven that the cheating took place with their knowledge, a current student's enrolment will be cancelled. Future enrolments from the assisting student will not be accepted in any courses or workshops conducted by Education Services.

Behaviour

When communicating with Education Services staff I am required to behave appropriately. Inappropriate behaviour includes, but is not limited to, oral or written abuse, coarse language, threats or slander.

Suggestions, feedback, complaints and appeals

I understand that throughout my course I can contact my Education Officer by phone or email to give suggestions and feedback or to discuss any matters which concern me. If I feel unable to discuss the matter with my Education Officer I can contact the Student Support and Administration Officer Education Services or the Quality and Compliance Officer.

Complaints procedure

In the event that I have a complaint concerning any matter in relation to the training or with Education Services I may contact the Student Support and Administration Officer Education Services or the Quality and Compliance Officer.

Privacy

I understand that

- HIMAA collects, manages and uses personal information for the purposes of general administration, identification, communication, program monitoring and evaluation strictly in accordance with privacy legislation. Student information is held, and disposed of, securely as required by law.
- HIMAA reports statistical data without personal identifiers to state and national regulatory bodies when required.
- I have the right to access my personal information subject to some exceptions allowed by law. In some instances I may be asked to make a request for personal information in writing. HIMAA reserves the right to charge a fee for supplying copies of qualifications and assessment information.

Declaration and consent

I _____ declare that I have answered all questions
(please print)

to the best of my knowledge and have read and understood the student agreement. I understand that the details I have provided to HIMAA are confidential and are protected by privacy laws. I give consent to HIMAA to use the information provided by me for reporting information to the relevant legislative bodies to meet the Australian Skills Quality Authority (ASQA) reporting requirements, and for the purpose of obtaining feedback and statistical reporting

Signature _____

Date _____

If under 18 years of age this form must be signed by your parent/guardian

Filename: Enrolment Elementary Medical Terminology	Page 4 of 4
Version 4.0	Date for review: December 2020
	Release date: December 2019