



# Certificate of Christian Education

## Application Form (Online Course)

You are applying to participate in the online training for the Certificate of Christian Education. Please complete the application form and forward to the National Office. We will then email you the access details as soon as possible. Once your application has been processed we will carefully package and post the certificate to you.

### The details we need:

Title (Mr/Mrs/Miss/Ms): \_\_\_\_\_ Name: \_\_\_\_\_ Surname: \_\_\_\_\_

School you are associated with: \_\_\_\_\_

ADDRESS - Street: \_\_\_\_\_ Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Code: \_\_\_\_\_

TELEPHONE: (W) \_\_\_\_\_ (H) \_\_\_\_\_ (M) \_\_\_\_\_

EMAIL ADDRESS - \_\_\_\_\_

I WOULD LIKE TO RECIEVE THE INSTITUTE'S eNEWSLETTER:  Y  N

<input type="checkbox"/> Application for the CCE (AU\$75) <input type="checkbox"/> Please also send me a Student Workbook* (AU\$15)
<input type="checkbox"/> Please debit my Mastercard <input type="checkbox"/> Please debit my VISA Card Number:      _ _ _ _ / _ _ _ _ / _ _ _ _ / _ _ _ _  Name on card:..... Expiry date:.....  Cardholder's Signature: .....  <input type="checkbox"/> I will post a cheque or money order <input type="checkbox"/> I will pay by direct debit <input type="checkbox"/> Please invoice my school

<p><b>DIRECT DEBIT DETAILS</b></p> <p>Commonwealth Bank</p> <p>BSB No: 062-121 Account No: 10611405</p> <p>Date paid:.....</p>
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\* **STUDENT WORKBOOK:** We have produced a student workbook that might like to keep for future reference for access to the course material.

*I have completed this form and acknowledge that the information provided is accurate.*

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please send completed application to [admin@nice.edu.au](mailto:admin@nice.edu.au) or PO Box 1892 Penrith, NSW 2751