



NIE UMAT Preparation Course 2010

Applicants Details

Name: _____

Address: _____

Postcode: _____

Phone: () _____

Email: _____

How did you find us? _____

Date and Location of Course

First Preference: _____

City: _____

Date: _____

Second Preference: _____

City: _____

Date: _____

Disclaimer:

NIE is in no way associated with, or endorsed by, ACER and the UMAT Consortium. NIE reserves the right to refuse or cancel any individual's application and to cancel any of its workshops. Refunds for cancellations by students will incur an administrative charge of no more than \$55. No refund will be given if an applicant cancels within three weeks of their scheduled workshop or after their manuals have been posted. NIE will not be held responsible for any injuries, inconvenience or loss associated with its operation or courses.

These courses have been specifically designed to assist candidates who wish to improve or maximize their UMAT score through the implementation of well researched and practiced preparation techniques.

Signature (parent or guardian): _____

Please make **cheque or money order** payable to NIE (**National Institute of Education**).

Mail to: **NIE**
 Admissions officer
 14 Peacock St
 West Brunswick
 Victoria 3055

Tel + Fax: (03) 8300 0277

Please tick appropriate box		
10 Premium	\$445	<input type="checkbox"/>
10 Platinum	\$855	<input type="checkbox"/>
10 DLP	\$405	<input type="checkbox"/>
10 Concession	\$395	<input type="checkbox"/>

Method of payment (please tick): Direct Debit Cheque Money Order

*If applying for Concession, please attach a certified copy of a Health Care Card

Office Use Only

Date: _____ Amount Paid: _____ Form: _____