Course Registration Form

Health Technology Assessment Course – Online   
Please complete this form and forward to the School of Public Health

Personal Details (please use block letters)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Title: | Enter your title | | | | Given/First Name(s): | | Enter Your Given/First name | | | Surname: | | Enter Your Surname | |
| Home Address: | | | | Home address | | | | | | | | | |
| Suburb: | | Suburb | | | | | State/Country: | State/Country | | | | Postcode: | Postcode |
| Mailing Address  (if different to above): | | | | Mailing Address if different to home address | | | | | | | | | |
| Suburb: | | Suburb | | | | | State/Country: | State/Country | | | | Postcode: | Postcode |
| Email: | | Your email address | | | | | | | | | | | |
| Telephone - | | | Work: | | | Work phone number | | | Mobile: | | Mobile phone number | | |
| Gender: | | | Female  Male | | | | | | Date of Birth: | | Date of birth | | |
|  | | | Indeterminate/Intersex/Unspecified | | | | | |  | | | | |
| Have you previously been a student or staff member at the University of Adelaide?  Yes  No  If so, what was you ID number (if known)? University of Adelaide ID number, if known | | | | | | | | | | | | | |

Enrolment Details - please select one of the following options

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| a) Award Student (taking course for credit and enrolled in a postgraduate degree at an Australian university) | | | |  |
| I am an | | Australian student  International student | | |
| Name of Degree: | | Name of Degree | | |
| University: | | Name of University | | |
| **b) Non-Award Student** (taking course for credit but not enrolled in a postgraduate degree) | | | |  |
| Award and non-award students will be contacted by The University of Adelaide regarding payment [Course Planner](https://access.adelaide.edu.au/courses/search.asp) can  be used to calculate applicable [Non-Award](https://www.adelaide.edu.au/enrol/other-enrolment-information/non-award-study) Course Fees | | | | |
| **c) Audit Participant** (not taking course for credit; no assessment) | | | |  |
| I am | in the Australian public/education sector  in the Australian private/commercial sector | | | |
|  | a non-Australian citizen/resident of a | | Low income country  Middle income country  High income country public sector/academic  High income country private sector/commercial | |

Policy on Timing of Payment and Cancellation Fees

|  |
| --- |
| If an enrolment is cancelled, the following penalty will apply: |
| * Cancellation received prior to the commencement of the course: full refund less $100 administration charge; for audit students enrolment in the course is transferrable to another individual within the same organisation * Cancellation received after the course has started: no refund, although for audit students enrolment in the course is transferrable to another individual within the same organisation. |

Background Information

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Please provide some background information regarding your skills and experience  so that we can better target the course | | | | | | | | | | |
| I am a complete novice to HTA, systematic reviews and the science of evidence-based health care | | | | | | | | | | |
| I have some background in the following (please indicate where appropriate) | | | | | | | | | | |
| *Field* | *Introductory* | | *Advanced* | | *Field* | | | *Introductory* | | *Advanced* |
| Systematic Reviews |  | |  | | Health Economics | | |  | |  |
| Clinical Epidemiology |  | |  | | Health Technology Assessment | | |  | |  |
| Evidence-based Health Care |  | |  | | Ethics | | |  | |  |
| Any additional information: include background information regarding your skills/experience that we can better target the course | | Let us know any other relevant information | | | | | | | | |
| The course assumes English language proficiency in reading, writing and speaking. | | | | | | | | | | |
| English Proficiency: | |  | | Fluent | | Some mastery | A little mastery | |  | |
|  | | Understand | |  | |  |  | |  | |
|  | | Speak | |  | |  |  | |  | |
|  | | Read | |  | |  |  | |  | |
|  | | Write | |  | |  |  | |  | |

Additional Information

|  |  |
| --- | --- |
| I am currently employed | |
| Employers name: | Employer’s name |
| Position held: | Position title |

The Following Section is For Audit Participants Only

|  |  |
| --- | --- |
| Course fee information is as follows (in Australian Dollars (AUD):  Discounts are available for audit students. For a group of participants from the same institution or organisation, the following discounts will apply: 3-4 participants: 10%; 5 or more participants: 20%; amounts inclusive of GST. | |
| **Australian attendees**  Public sector / academic / government $1,800.00 Private sector / commercial $2,890.00 | **International attendees**  Low income country $969.00 Middle income country $1,800.00 High income country   Public Sector / academic / government $2,500.00  Private Sector / commercial $3,000.00 |
| Payment Upon acceptance of registration enrolment to the course will be facilitated once payment has been received. | |
| I would like to pay via:  Credit Card online payment  Invoice | |

Contact Details and Further Enquiries

Please complete the application form and return it to:

|  |  |
| --- | --- |
| School of Public Health Level 4, Rundle Mall Plaza 50 Rundle Mall The University of Adelaide | Or via mail:  School of Public Health Mail Drop DX 650 550 University of Adelaide SA 5005 |

Or via email

**Ph**: +6 8 8313 4131

**Email**: [sphadmin@adelaide.edu.au](mailto:sphadmin@adelaide.edu.au)

**Web**: [health.adelaide.edu.au/public-health](https://health.adelaide.edu.au/public-health)