# Staff Discount Application Form

*If, at the time of their enrolment in a unit of study, a student is an employee of the University, or an employee of a College who is a member of the University under Regulation 8.2 Categories 4, 6 or 7, the student is entitled to a 30% discount on the tuition fee for that unit of study.*

***4.*** *College members appointed to a University office (Principal, Academic Dean, Research Coordinator, Registrar, course advisors)*

***6.*** *Employees of a Library of the University*

***7.*** *Academic staff (including honorary appointments) accredited by the University*

The student is encouraged to check their contact and enrolment details via Paradigm. Complete, sign, and send or email this form to your home college/school.

## Student and Course Information

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| UD Student ID |  | | | College/School ID | | |  |
| Title |  | | | Family name | | |  |
| First given name |  | | | Other given name(s) *(middle)* | | |  |
| Email (Required) |  | | | Mobile phone | | |  |
| Course |  | | | | | | |
| Current course fee payment arrangement | |  | Upfront | |  | FEE-HELP | |
|  | HECS-HELP (Bachelor of Counselling Only) | |  | Mixed Payment | |

## Citizenship Details *(mark one box)*

|  |  |  |  |
| --- | --- | --- | --- |
| **Citizenship Details** | | | |
|  | Australian citizen |  | NZ citizen |
|  | Australian Permanent Visa holder |  | Permanent humanitarian visa holder |
|  | Other, please specify: |  | |

## Unit(s) Applying for Staff Discount

List all units for enrolment from your application for admission/re-enrolment or amendment form and how you will pay for them. For each unit, complete payment either as a percentage or in fixed amounts.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Enrolled units** | | **Payment as percentage (%) or amount ($)** | | | | | |
| **Unit code** | **Unit name** | **Semester** (Eg. Sem 2, 2024) | **Staff Discount (30%)** | **HECS-HELP\*** | **FEE-HELP** | **Upfront** | **Sponsor** |
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| *\*HECS-HELP is only available to Bachelor of Counselling students* | | | | | | | |

## Privacy Information

The information on this form is collected for the primary purpose of assessing your application or re-enrolment. Other purposes of collection include the creation of a record on the student database, attending to administrative matters, corresponding with you, and statistical analyses. If you choose not to complete all the questions on this form, it may not be possible for the University of Divinity to assess your application or re-enrolment. All sensitive and personal information will be handled in accordance with the University’s Privacy Policy. Personal information may be disclosed to authorised bodies and the permitted purposes for which such personal information may be used, as authorised by the Higher Education Support Act 2003. For details of the privacy and collection statement that applies to this form, please go to <https://divinity.edu.au/privacy>.

You have a right to access personal information that the University of Divinity holds about you, subject to any exceptions in relevant legislation. If you wish to seek access to your personal information or inquire about handling of your personal information, please contact the University of Divinity at [enquiries@divinity.edu.au](mailto:enquiries@divinity.edu.au).

## Student Acknowledgement

|  |  |  |  |
| --- | --- | --- | --- |
| All information given to support this change of enrolment is to the best of my knowledge correct and **complete** | | | |
| Name/ Signature |  | Date | /     / |
| *Type name for electronic submission* | *dd.mm.yyyy* |

## College/School Checking and Approval

|  |
| --- |
| **College/School to Complete**  I have checked this student’s finance amendment form and confirm that the Staff Discount has been approved based on  *The student is an employee of the University*  ***4.*** *The student is a college member appointed to a University office (Principal, Academic Dean,*  *Research Coordinator, Registrar, course advisors)*  ***6.*** *The student is an employee of a Library of the University*  ***7.*** *The student is an academic staff member (including honorary appointments) accredited by*  *the University* |

|  |  |  |  |
| --- | --- | --- | --- |
| College/School Registrar’s Signature |  | Date | **/**  **/** |

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| --- | --- | --- | --- |
| College Principal’s/Head of School’s Approval |  | Date | **/**  **/** |

## OVC Office Use Only

|  |  |  |  |
| --- | --- | --- | --- |
| *Check Staff Plus*  *Key Staff Discount on Paradigm*  *Inform Finance* | | | |
| OVC Student Services Signature |  | Date | **/**  **/** |