

ARIMGASAS Clinical Trial Examination - Application Form

<b>STUDENT ENROLMENT INFORMATION – 2015</b>	Student Number:

STUDENT PERSONAL DETAILS					
Given Name					
Family Name					
Preferred Name (if applicable)		Gender (circle)	M / F	Birth Date dd-mm-yy	/ /
Email Address					
Phone		Mobile			
CLINICAL TRIAL EXAMINATION ENROLMENT DETAILS					
AMC Candidate Number					
AMC Clinical Exam Date	<i>Date you wish to start the course</i>				
Location					
RESIDENTIAL ADDRESS DETAILS					
Address					
Suburb		Post Code			
State		Country			
MAILING ADDRESS DETAILS – Write “AS ABOVE” if the same as Residential Address					
Address					
Suburb		State			
PAYMENT OPTIONS					
1. Credit Card	_____ exp: ___ / ___ ccv ____ Signature: _____				
2. PayPal	Online application form (1 % surcharge applies)				
3. Local Bank Transfer	Name: Alan Roberts IMGASAS Bank: WESTPAC BSB: 033-395 Account: 450 188 Reference: <i>Your Name</i>				
4. International Bank Transfer	Name: Alan Roberts IMGASAS Bank: WESTPAC BSB: 033-395 Account: 450 188 Reference: <i>Your Name</i> Branch: Doncaster, Victoria, SWIFT CODE / IBAN: WPACAU2S				
5. Bank Cheque or Bank Drafts	Payable to Alan Roberts International Medical Graduates Support and Advisory Services P/L				
6. In Person	EFTPOS Terminal				
<i>Note: Options 1, 3, 4, 5 &amp; 6 have no surcharge                      All Payments made to Alan Roberts IMGASAS. We do not accept American Express or Diners Club Cards.</i>					

**Disclaimer:**

- \*AR IMGASAS works in the best interest for IMG’s and ARIMGASAS reserves the right to change the pricing for its courses as required.
- \* ARIMGASAS reserves the right to cancel a workshop or course if the course does not meet minimum students required.
- \*You need to provide confirmation of your AMC Clinical Exam dates or else you will not be given a position in ARIMGASAS Clinical Trial Exams.

For information on the above course please email to [admin@imgaustralia.net.au](mailto:admin@imgaustralia.net.au)

### How to apply

Print the enrolment form provided, complete and send as email attachment to [admin@imgaustralia.net.au](mailto:admin@imgaustralia.net.au).

Please provide a scanned copy of your passport size photo and your CV with your application form.

### Application Processing and Closure

- \$500 the full amount will be deducted on application as fees for the CLINICAL TRIAL EXAMINATION
- Application for CLINICAL TRIAL EXAMINATION closes one week before the Exam Date.

### Fees and refunds

- ARIMGAS CLINICAL TRIAL EXAMINATION is priced at \$500.00
- No refunds will be provided if you cancel your application.
- All fees must be paid in full to confirm your place.
- Should you be unable to attend, a substitute participant is always welcome or you can postpone your enrollment (subject to availability). Please inform us at least two weeks prior to start date should you wish to substitute or postpone your place

### Payments

You can pay with Master card / Visa / Bank Cheque or Bank Draft / or direct deposit into Alan Roberts IMGAS bank account.

### Enquiries

For all enquiries please email [admin@imgaustralia.net.au](mailto:admin@imgaustralia.net.au) or call us on +613 9867 3344.

### PRIVACY NOTICE:

ARIMGAS collects personal information from you including your name, date of birth, and contact details. We use this information to provide you with educational and other services requested by you. We do not pass this information to third parties without your consent except where required or authorised by law. You may access your personal information to determine what is being held and to correct the information if it is found to be inaccurate by contacting us.