

Apostolic Church Australia Internship Registration Form

Send to: ACA Internship Co-ordinator,
c/- Australian Apostolic College.
PO Box 384.
The Gap, Brisbane Qld 4061.
Email: aacollege@apostolic.org.au, Fax 07 3300 0021

Personal Details

Mr Mrs Miss Ms. Surname:
First Name: Middle
Address:
Suburb: Postcode:
Phone (H): (Other):
Date of Birth: (dd/mm/yyyy) Email:

Local Church Details

Church Name: Senior Minister's Name:
Church Phone : Church Email:
Intern Supervisor's Name.....Phone.....Email.....
Church Postal Address:
Suburb: State: Postcode:
Is your minister aware of your decision to participate in an Apostolic Church Internship? Yes No
List current church involvement :
.....

Course Selection: I am enrolling in the following the course (Print in Course Title)

.....

Commencing:

I would like to commence my internship on:(date)

Name of Training Organisation.....

Agreement

I hereby certify that all of the supplied information is true and correct to the best of my knowledge. If accepted as an intern I agree to abide by all of the rules and regulations. I have read and understood the Code of Conduct of Internship within the Apostolic Church Australia as per "Conditions of Service" (see ACA Procedure Manual) & Statement of Faith see www.apostolic.org.au follow the "what we believe" link.

While every effort is made by Apostolic Church Australia to deliver the program as described, Apostolic Church Australia reserves the right to withdraw subjects at any time, change fees, rules, calendars, curriculum, course programs, course requirements, graduation procedures, and any other requirement affecting students and those already enrolled.

The required minimum age for entrance to the internship program is 18 years, unless parents and faculty gives permission otherwise.

Signature of Student: Date:

Signature of Parent or Guardian: (If under 18 years of age) Date: