



**CZANE**

Beauty and Academy

## STUDENT APPLICATION AND ENROLMENT FORM

**Instructions:** Complete all sections clearly. Tick the relevant boxes and sign before submission.

### 1. Student details

Name and surname	
ID number / Passport number	
Course enrolled for	
Email address	
Cell phone number(s)	
Physical address	
Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female
Age	
Disability / reasonable accommodation required	<input type="checkbox"/> Yes <input type="checkbox"/> No

### 2. Study mode applied for

I am applying as	<input type="checkbox"/> Online student <input type="checkbox"/> In-person student (campus)
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### 3. Proof of payment

Proof of payment attached	<input type="checkbox"/> Yes <input type="checkbox"/> No
Payment reference / student name used	D

### 4. Personal information consent

I consent to CZANE Beauty and Academy collecting and processing the personal information in this form for learner enrolment, administration, communication, record-keeping, payment verification and learner support. I understand that my information must be kept secure and used only for lawful school-related purposes. Disability or accommodation information is collected only to arrange reasonable learner support.

**Acknowledgement:**  I have read and accepted the personal information consent above.

### 5. Enrolment and resource-use agreement

I confirm that the information provided above is true and correct. I understand that once my enrolment has been accepted and I have received or accessed CZANE Beauty and Academy resources, including learning material, training content, classes, online groups, equipment access or other learner resources, those resources are treated as supplied or accessed. I agree that fees paid for resources or services already supplied or accessed may be non-refundable for that supplied/accessed portion, except where a refund is required by applicable law, where the service has not been supplied, or where CZANE Beauty and Academy agrees otherwise in writing. Cancellation or refund requests will be dealt with according to applicable law and may be subject to reasonable cancellation or administration costs. I agree to use the resources responsibly and follow the school rules.

**Acknowledgement:**  I have read, understood and accepted the agreement above.

### 6. Signature

Student full name	
Student signature	
Date	
Parent/guardian signature if student is under 18	

## 7. Submission instruction

Submit this completed application form to [czane5506@gmail.com](mailto:czane5506@gmail.com) together with your proof of payment. Applications may not be processed until the completed form and proof of payment are received.