

PARENTAL/GUARDIAN AGREEMENT

- 1) I understand and accept that completion of this form does not guarantee my child a position in the College Training Program/s.
- 2) I understand and accept that my child’s acceptance into the Islamic College of Melbourne is dependent on the results of the Pre Training Interview and LLN test and behaviour observed during the test and interview.
- 3) I understand and accept that the college reserves the right to offer my child a position at the college, place my child on the waiting list or reject my child depending on the information collated from the results and observation, without bias.
- 4) I understand that the college reserves the right to refuse any application for enrolment and is under no obligation to provide further explanation for its decision.

Father/Guardians Full Name Father/Guardians Signature Date

Mother/Guardians Full Name Mother/Guardians Signature Date

For further information please contact the Islamic College of Melbourne on 03 8742 1739.

Please return this completed form and Semester Report either;

- A. By email to: rtomanager@icom.vic.edu.au
- B. By post to: Attention: RTO Manager
 Administration Office
 Islamic College of Melbourne
 PO Box 8153
 TARNEIT VIC 3029
- C. In person directly to the College’s Administration Office.

Office Use Only

Comments: _____

Received by: _____ Date received: _____