

Phased Array (PA) Course Enrolment Form

STUDENT DETAILS

Student Name¹:	Date of Birth: / /	
Address¹:	State:	
Suburb/City:	Post Code:	
Phone:	Fax:	Mobile:
Student Email²:		
Payment of Fees by: <input type="checkbox"/> Student <input type="checkbox"/> Company		

COMPANY DETAILS – only required if Company is responsible for payment of fees

Company Name:	
Company Billing Address¹:	State:
Suburb/City:	Post Code:
Email for Invoice²:	
Company Telephone:	
Company Purchase Order No: (Only for Approved Purchasers)	

¹ The name and address supplied above will be used for all correspondence including certificates and letters of results.

² Where possible, it is our preference to email all course enrolment details to both student and company. Where supplied, Invoices will be emailed to the company email address.

COURSE DETAILS

Course	Venue	Dates	Fees
Total Course Fees Payable			

I understand the following conditions of enrolment and acknowledge by my signature:-

- This Enrolment is subject to the scheduled course proceeding. In the unlikely event that this course(s) is cancelled, all monies paid to ATTAR will be refunded in full.
- ATTAR is able to allocate equipment for students who provide 10 working days notice of equipment requirements (via this enrolment form).
- I have read and I understand the ATTAR Student Handbook.
- **I will not be allocated a place on my nominated course(s) until all course fees have been paid in full.**

Student Signature: _____

Date of Birth: / /

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Student Name: _____

Date of Birth: / /

PRE-REQUISITE INFORMATION FOR AS3998/AS3669 TRAINING AND ASSESSMENT

Pre-requisites for AS3998/AS3669 Training and Assessment

Course Name	Pre-requisites
Introduction to Phased Array	Ultrasonics Level 2
Phased Array Level 2	Ultrasonics Level 2 (Welds) ¹

¹Maths pre-requisite worksheets can be located at www.attar.com.au or contact ATTAR if you require them to be sent by hard copy.

Introduction to Phased Array

Pre-Requisites: The Student listed above hereby declares that:

- I understand that this course has a pre-requisite of Ultrasonics Level 2
- I **WILL** supply the following equipment: (Please tick the appropriate Box)

Flaw Detector

Phased Array Unit.

Probes & Leads

Probes Suitable for Weld Scanning

Calibration Pieces

V1 and IOW Blocks

Phased Array Level 2:

- a) I understand that this course has a pre-requisite of Ultrasonics Level 2 (Welds) and that I have current ultrasonic skills and knowledge.
- b) I understand that this course has a pre-requisite of Basic Phased Array Knowledge and Use INCLUDING
- Basic Setup and Calibration
Basic Data Collection
- c) I understand that on the commencement of the course I will be examined on my basic maths and Ultrasonics Level 2 knowledge to confirm suitability to attend the course, and may be removed from the course if my knowledge is deemed inadequate.

I **WILL** supply the following equipment: (Please tick the appropriate Box)

Flaw Detector

Phased Array Unit.

Probes & Leads

Probes Suitable for Weld Scanning

Calibration Pieces

V1 and IOW Blocks

Student Signature: _____

Date of Birth: / /

