



Continuing Education and Development Unit

**APPLICATION FORM**

Please complete this application form to apply for all Continuing Education and Development Unit courses and study days. **Please print clearly**

<b>Session Title</b>	
<b>Start Date</b>	

<b>Applicant Name</b>	
<b>Employee Number</b>	
<b>Classification</b>	
<b>Ward / Unit</b>	
<b>Hospital</b>	
<b>Home Address</b> (inc postcode)	
<b>Home Phone Number</b>	
<b>Work Phone Number</b>	

<b>Have you discussed your roster availability with your Nurse Manager?</b>	<input type="checkbox"/> Request Made <input type="checkbox"/> Availability Confirmed <input type="checkbox"/> N/A - Rostered Day Off
<b>Applicant's Signature</b>	
<b>Nurse Manager's Signature</b>	

**Please forward completed application to  
Continuing Education and Development Unit**

Phone ☎ 7732

Fax 📠 7213

Email ✉ [cedu@phcn.vic.gov.au](mailto:cedu@phcn.vic.gov.au)

Internal Mail 📧 CEDU, Academic Centre, Frankston