

**TERROCK**  
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**APPLICATION FORM  
FOR PRACTICAL AND ORAL ASSESSMENT OF SHOTFIRERS  
UNDERGROUND, QUARRY & SURFACE MINING**

<b>SURNAME:</b>	_____	<b>EMPLOYER'S NAME:</b>	_____
<b>FIRST NAME:</b>	_____	<b>EMPLOYER'S ABN:</b>	_____
<b>ADDRESS:</b>	_____	<b>ADDRESS:</b>	_____
<b>POSTCODE:</b>	_____		_____
<b>CONTACT PHONE NO:</b>	_____	<b>BUSINESS PHONE NO:</b>	_____
<b>USI NUMBER:</b>	_____		_____
<b>OCCUPATION:</b>	_____	<b>FAX NO:</b>	_____
<b>DATE OF BIRTH:</b>	_____	<b>E-MAIL:</b>	_____
<b>PAYMENT METHOD *</b>	_____		

The following information is required for Department of Education statistical purposes. Your details are private, and will not be passed to anyone, unless required by law.												
<b>Year you finished High School?</b>							<b>Do you have Tertiary Qualifications?</b>	<b>Trade</b>		<b>Diploma</b>		<b>Degree</b>
<b>High School level you completed?</b>	<b>Yr9</b>		<b>Yr10</b>		<b>Yr11</b>		<b>Country of birth?</b>					
<b>Any permanent disabilities?</b>	<b>Y / N</b>	<b>Aboriginal or Torres Strait Islander?</b>				<b>Y / N</b>	<b>Major language?</b>					

