

ENROLMENT FORM

Privacy Statement and Disclaimer

Information collected about an individual learner or intended applicant in this form and during the student enrolment, can be provided by Vocational Skills Australia, the Commonwealth including the TPS or state or territory agencies, in certain circumstances, to the Australian Government and designated authorities; in accordance with the Privacy Act 1988. In other instances, information collected on this form or during your enrolment can be disclosed without your consent where authorised or required by law.

Under the Data Provision Requirements 2012, Vocational Skills Australia is required to collect personal information about any individual learner or intended applicant and to disclose that personal information to the National Centre for Vocational Education Research Ltd (NCVER).

Learner's personal information (including the personal information contained in Written Agreement and Acceptance Offer and during the course of their study), may be used or disclosed by Vocational Skills Australia for statistical, administrative, regulatory and research purposes. Vocational Skills Australia may disclose your personal information for these purposes too:

- Commonwealth and State or Territory government departments and authorised agencies; and
- NCVER.

Personal information that has been disclosed to NCVER may be used or disclosed by NCVER for the following purposes:

- Populating authenticated VET transcripts.
- Facilitating statistics and research relating to education, including surveys and data linkage.
- Pre-populating RTO student enrolment forms.
- Understanding how the VET market operates, for policy, workforce planning and consumer information; and

Administering VET, including program administration, regulation, monitoring and evaluation.

For any other third party, Vocational Skills Australia will only release student information with the written consent of the student. We will endeavour to take reasonable steps to protect personal information from misuse, loss or unauthorised access, modification or disclosure.

I understand that:

- The *Data Provision Requirements 2012* (refer www.comlaw.gov.au) requires the College to provide the national regulator ASQA, with student and training activity data and quality indicator data which may include information I provide in this enrolment form.
- Information is required to be provided in accordance with the Australian Vocational Education and Training Management Information Statistical Standard (AVETMISS) guidelines.
- I can access details of AVETMISS from www.ncver.edu.au.
- The Federal Government may use the information provided to it for planning, administration, policy development, program evaluation, resource allocation, and reporting and/or research activities.
- The collection, release and access to data is governed by a set of protocols and policies which set out the principles and commitments for the storage and disclosure of vocational education and training information, are determined by the Ministerial Council for Tertiary Education and Employment.
- The *Education Services for Overseas Students Act 2000* requires the College to provide the Federal Government with information relating to International student enrolments and academic progress.

I have been advised by the RTO that:

- My personal information provided on this enrolment form will be kept private, confidential and secure by all College staff.
- VSA will release data to the relevant authorities if required.
- I may be contacted and requested to participate in a National Centre of Vocational Education Research survey or audit or internal review. For more information in relation to how student information may be used or disclosed please contact the College CEO.
- I understand that The RTO Australia Pty Ltd will not issue a certificate and/or statement of attainment until all the appropriate documentation has been completed, signed, and all fees have been paid.

I give permission for the RTO to:

- Create a Unique student identifier (USI) on my behalf **AND/OR** check my details of my USI
- Access my personal USI information (*do not tick if you do not want the RTO to access your personal USI information*)
- Or their representative to obtain Medical Treatment in the event of an emergency. I indemnify Vocational Skills Australia of their representative.
- I consent/I do not consent to the use of my photos/videos/testimonials/interviews to be used in Vocational Skills Australia promotional materials prepared for the marketing purposes in Australia and overseas.
- I agree and will abide with all the terms and conditions specified in the Vocational Skills Australia Student Handbook.**

By signing below, I acknowledge and agree to the above:

Signature	Date:	
PERSONAL INFORMATION		
Title:	Given Name:	Middle Name:
Surname:	Birth Date: ____/____/____	Gender: Male: <input type="checkbox"/> Female: <input type="checkbox"/>
Home Ph: ()	Work Ph: ()	Mobile
Email:	<input type="checkbox"/> CAMPUS <input type="checkbox"/> MELBOURNE <input type="checkbox"/> ADELAIDE	

QUALIFICATION SELECTION (Please select all the courses you are enrolled in as Vocational Skills Australia student)

I am willing to enroll in the following course/s (Please tick in the box):

<input type="checkbox"/>	BSB60120 Advanced Diploma of Business (CRICOS Code: 106748H)
<input type="checkbox"/>	MSF30322 Certificate III in Cabinet Making and Timber Technology (CRICOS Code: 118526A)
<input type="checkbox"/>	MSF30422 Certificate III in Glass and Glazing (CRICOS Code: 118527M)
<input type="checkbox"/>	CPC31320 Certificate III in Wall and Floor Tiling (CRICOS Code: 118524C)
<input type="checkbox"/>	FNS40222 Certificate IV in Accounting and Bookkeeping (CRICOS Code: 110021B)
<input type="checkbox"/>	BSB40120 Certificate IV in Business (CRICOS Code: 106746K)
<input type="checkbox"/>	FNS50222 Diploma of Accounting (CRICOS Code: 112635M)
<input type="checkbox"/>	CPC50220 Diploma of Building and Construction (Building) (CRICOS Code: 118525B)

<input type="checkbox"/>	BSB50120 Diploma of Business (CRICOS Code: 106747J)
<input type="checkbox"/>	BSB50820 Diploma of Project Management (CRICOS Code: 106749G)

Commencement Date: // _____

Are you applying for Credit Transfer or RPL for the unit successfully completed at another provider? YES
 NO

(If YES, please complete the Credit Transfer or RPL application form and submit it to the student. Administration with supporting documents such as an official transcript or statement of attainment)

UNIQUE STUDENT IDENTIFIER AND PREVIOUS SCHOOLING OR TRAINING IN AUSTRALIA	
Do you have a Unique Student Identifier	
Do you have a Unique Student Identifier	<input type="checkbox"/> YES – please provide
Would you like the College to create a USI for you?	<input type="checkbox"/> No – go to below question
Have you attended any Secondary School/College since 2009 or done any training with vocational education and training (VET) registered training organisation or an Adult and Community Education provider in Australia since 2011?	<input type="checkbox"/> YES <input type="checkbox"/> NO (Please provide USI as soon as possible)
<input type="checkbox"/> YES – Answer the questions to the right <input type="checkbox"/> NO – go to emergency contact information	
Have you attended any Secondary School/College since 2009 or done any training with vocational education and training (VET) registered training organisation or an Adult and Community Education provider in Australia since 2011?	<input type="checkbox"/> No - I have not attended a Secondary School/College or a TAFE or other VET training provider in Australia. <input type="checkbox"/> <input type="checkbox"/> Yes – I have attended a Secondary School/College in Australia
<input type="checkbox"/> YES – Answer the questions to the right <input type="checkbox"/> NO – go to emergency contact information	Highest completed school level? Year 8 or below <input type="checkbox"/> Year 11 or equivalent <input type="checkbox"/> Year 9 or equivalent <input type="checkbox"/> Year 12 or equivalent <input type="checkbox"/> Year 10 or equivalent <input type="checkbox"/>
	Most recent school attended: _____ (Provide name) Still attending? <input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes – I have participated in training at a TAFE or other RTO <input type="checkbox"/>
	List the most recent training organisations with which you have participated in training in Australia: 1. _____ 2. _____

EMERGENCY CONTACT INFORMATION			
Emergency Name:	Contact	Relationship:	
Mobile:		Phone:	()
Email Address:			
Building/Property Name:		Flat/Unit Number:	
Street Number:		Street Name:	
Suburb:		State:	
Postcode:			

AUSTRALIAN RESIDENTIAL ADDRESS INFORMATION			
Building/Property Name:		Flat/Unit Number:	
Street Number:		Street Name:	
Suburb:		State:	
Postcode:			

LANGUAGE AND CULTURAL DIVERSITY

In which **country** was you born:

Australia

Other – please specify _____

How well do you speak English?

Very well

Well

Not well

Not at all

Do you speak a language other than English at home? *(If more than one language, indicate the one that is spoken most often at home)*

No, English only – go to next question ATSI status

Yes, other – please specify _____

ATSI STATUS

Are you of Aboriginal or Torres Strait Islander origin?
(For persons of both Aboriginal and Torres Strait Islander origin, mark both 'Yes' boxes)

No

Yes, Aboriginal

Yes, Torres Strait Islander

EDUCATION

Are you still attending secondary school/college? Yes No

What is your highest COMPLETED school level?

Year 12 Year 11 Year 10

Year 9 or Equivalent Year 8 or Lower Never Attended School

In which year did you complete that school level?

Which school did you attend?

EMPLOYMENT

Of the following categories, which BEST describes your current employment status?

- | | | | | | |
|-----------|--------------------------|-----------------------------------|--------------------------|--------------------------------------|--------------------------|
| Full Time | <input type="checkbox"/> | Employed – unpaid family worker | <input type="checkbox"/> | Self Employed – Not Employing Others | <input type="checkbox"/> |
| Part Time | <input type="checkbox"/> | Unemployed – Seeking F/Time Work | <input type="checkbox"/> | Unemployed – Not Seeking Employment | <input type="checkbox"/> |
| Employer | <input type="checkbox"/> | Unemployed – Seeking P/ Time Work | <input type="checkbox"/> | | |

DISABILITY

Do you consider yourself to have a disability, impairment or long-term condition? Yes No

If YES, then tick ANY applicable boxes:

- | | | | | | |
|--------------|--------------------------|-------------------|--------------------------|---------------------------|--------------------------|
| Hearing/Deaf | <input type="checkbox"/> | Physical | <input type="checkbox"/> | Intellectual | <input type="checkbox"/> |
| Learning | <input type="checkbox"/> | Mental illness | <input type="checkbox"/> | Acquired Brain Impairment | <input type="checkbox"/> |
| Vision | <input type="checkbox"/> | Medical Condition | <input type="checkbox"/> | Other | <input type="checkbox"/> |

QUALIFICATIONS

Have you SUCCESSFULLY completed any of the following qualifications? Yes No

If YES, then tick ANY applicable boxes:

- | | | | |
|--|--------------------------|--|--------------------------|
| Bachelor Degree or Higher Degree level | <input type="checkbox"/> | Advanced Diploma or Associate Degree Certificate IV (Or Advanced Certificate/Technician) | <input type="checkbox"/> |
| Diploma (or Associate Diploma) | <input type="checkbox"/> | Certificate II | <input type="checkbox"/> |
| Certificate III (Or Trade Certificate) | <input type="checkbox"/> | Certificates other than the above | <input type="checkbox"/> |
| Certificate I | <input type="checkbox"/> | | |

TRAINING AND ASSESSMENT ASSISTANCE

Do you require assistance for language, literacy and numeracy? Yes No

STUDY REASON

Of the following, which **best** describes your main reason for undertaking this course? Tick one box only.

- | | | | |
|---------------------------------|--------------------------|--|--------------------------|
| To get a job | <input type="checkbox"/> | It was a requirement of my job | <input type="checkbox"/> |
| To develop my existing business | <input type="checkbox"/> | I wanted extra skills for my job | <input type="checkbox"/> |
| To start my own business | <input type="checkbox"/> | To get into another course of study | <input type="checkbox"/> |
| To try for a different career | <input type="checkbox"/> | For personal interest/self-development | <input type="checkbox"/> |
| To get a better job or | <input type="checkbox"/> | Other reasons | <input type="checkbox"/> |

I declare that all the information provided above in this Enrolment Form is true and accurate.

Signature:		Date:	
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