

Enrolment Form

Students who would like to enrol in a program or qualification must complete **all** areas of the Enrolment Application Form. Please note that the information contained with this document may be supplied to, and used by governments and other agencies for administration and research in accordance with legislative requirements.

1. Course Details							
Qualification Name							
Qualification Code							
Short Courses							
Delivery Method		□Classroom □Work base □Recognition of Prior Learning Assessm □Blended □E-Learning			sessment	aining and	
Proposed Course Dates							
Do you wish to apply for RPL or Credit Transfer? If yes, please attach relevant transcript(s)		□Yes □ No	□Yes □ No				
2. Personal Details							
When completing the table tany middle names and provi training, work or other purpo	de the physical address						
Title	□Mr □Ms □Mrs □	∃Miss □Other	Gender		□Male □Female □Other		
First Name			Surnam	ne			
Middle Name			Former (if appli				
Unique Student Identifier (USI)			Date of	Birth	/_		
Residential Address							
Suburb			State		Post Code		
Postal Address (if different from above)			State		Post Code		
Email Address							
Home Phone			Work P	hone			
Mobile Phone			Emerge	ency Phone			
Emergency Contact							
3. Employer details	s (Apprenticeship –	Traineeship courses	only)				
Employer Name							
Contact Name			Contact	details			
Workplace address							



4. Disability/ Special Need

All information is collected, stored and destroyed confidentially. The information collected below will be used to support students who
have a special need or an additional support requirement by the development of an individualised learning and assessment plan. For
government subsidised students who have a disability fee concessions maybe available.

government subsidised sit	idents who have a	disability fee coi	icessions maybe available.			
Do you have a disability, impairment or long term condition? NOTE : You may select more than one area.			☐Yes ☐No If yes, please select the are	as in the follow	ving list.	
☐ Hearing/Deaf ☐ Learning ☐ Physical ☐ Mental Illness ☐ Intellectual		☐ Vision ☐ Medical Condition	□ Oth □ Acq	er uired brain impairment		
Has your disability ever been assessed by a health professional/specialist?			☐ Yes ☐ No			
Are you on a disability support pension?		☐ Yes ☐ No				
Are you a dependent child or spouse of a person in receipt of a disability support pension?		☐ Yes ☐ No				
5. Language and	Cultural Diversi	ty				
	T			1		
Are you an Australian Citizen?	□ Yes □ No	Are you a perr	manent resident?	□ Yes □ N	0	
Evidence of citizenship/ residency/visa		☐ Birth Certificate ☐ Medicare card ☐ Passport ☐ Naturalisation Certificate ☐ Driver Licence		☐ Certificate of Evidence Resident Status (CERS) ☐ Photo identity card ☐ Visa ☐ Other		
If you are not an Australian Citizen or Permanent Resident, list your Visa Type.		Visa Type		Place of Birth - Town /State		
In which country were you born in?			☐ Other – Please Specify			
Do you speak a language other than ☐ No English at home?			☐ Yes – Please Specify			
How well do you speak English? ☐ Very well ☐			□ Well □ Not well □ Not	at all		
		, Aboriginal ☐ Yes, Torres Strait Islander ons of both Aboriginal and Torres Strait Islander origin, tick both YES boxes.				
6. Schooling						
Are you still attending secondary school?			□ Yes □ No			
If under 17 years of age. have you completed your Year 10 certificate or equivalent?			□ Yes □ No □ N/A			
What is the highest level of school that you completed?		☐ Year 12 or equivalent☐ Year 9 or equivalent☐ Year 8 or below☐ Year 10 or equivalent		☐ Year 9 or equivalent☐ Year 8 or below		
In what year did you complete the highest school level?						
Are you currently studying with another Registered Training Organisation (RTO)?			□ Yes □ No	□ Yes □ No		
If you are currently studying with another RTO, are you wanting to transfer your enrolment?		□ Yes □ No □ N/A				
Are you registered for a NSW Traineeship? If currently registered or awaiting registration for a NSW Traineeship, please identify your Apprenticeship Centre.			□ Yes □ No			



7. Previous Qualifications Achiev	ed			
Have you successfully completed a qualification?		☐ Yes ☐ No If YES, tick the applicable boxes		
, , , , , , , , , , , , , , , , , , , ,		Certificate II Certificate I Certificate I Certificate I Certificate I Certificate I Certificate I Certificates other than the above		
Did you complete your qualification(s)?		 □ Whilst at school □ Since leaving school □ This calendar year 		
Did you achieve your qualification after turnir age?	ng 17 years of	□ Yes □ No		
	Qualification			Year
If yes, identify the qualification and year completed.				
NOTE: If applying for credit transfer				
please attach a copy of your Qualification and Transcript of Results.				
Results.				
8. Employment				
Of the following categories, which best descr	lbes your curren	it employment status?	?	
	mployed – not er			paid in a family business
1	□ Part-employee □ Unemployed – seeking full-time work □ Not employed – not seeking employme □ Unemployed – seeking part-time work □ Expected to be unemployed			
= Employer		, part and work		anompioyed
Have you been unemployed for a period greater than 52 weeks? ☐ Yes ☐ No Note: If YES please provide evidence				
Are you currently registered with a Job/ Employment Service Provider?	□ Yes □ No			
If YES – Please provide the following				
Name of Job/ Employment Service Provider				
Employment Service Provider Client ID (JSID)				
9. Study Reason	'			
Of the following categories, which best describes your reason for undertaking this course / traineeship / apprenticeship?				
☐ To get a job ☐ To try for	a different care	er □ I wanted extra	a skills for my 🗆 F	or personal reasons or
☐ To develop my existing ☐ To get a better job or		job		-development
business promotion		☐ To get into ar		o get skills for
☐ To start my own business ☐ It was a r job	equirement of m	y of study		nmunity/voluntary work Other reasons



10. Refund Policy

REFUND INFORMATION

We will make refunds to students in certain circumstances as listed below. To apply for a refund, you should: email a request/ fill in our Refund Form located on our website and send to admin@actacollege.edu.au

REFUNDS

Circumstance	Refund Policy
Withdrawing from a training program.	You will be entitled to a full refund of fees paid if you withdraw more than 7 days before the scheduled start of the training program.
	If you withdraw within 7 days before the scheduled start of the training program you will be entitled a credit voucher may be obtained for any future class for a period of one year only, OR, apply in writing to the Committee for a refund. Once a course has started funds are committed and cannot be refunded or transferred.
If a training program is cancelled before commencement	You will be entitled to a full refund of fees paid.

Provider Fee Refund Guarantee

IF for any reason we (ACTA)cannot complete	You will be entitled to a refund of fees proportional to the amount of training not delivered
the training	

11. Unique Student Identifier

From 1 January 2015 all students undertaking nationally recognised training must have a Unique Student Identifier (USI) and provide that USI to their Registered Training Organisation for verification. If you do not have a USI number, you can apply directly at http://www.usi.gov.au/create-your-usi/ . ACTA is not able to issue AQF certification documentation (your certificate, record of results or statement of attainment) without a verified USI.
Read the permission statements below and tick if consent is provided.
I have read and I consent to the collection, use and disclosure of my personal information pursuant to the information detailed at http://www.usi.gov.au/Training-Organisations/Pages/Privacy-Notice.aspx also contained on page 6 of the enrolment form. I give my permission to ACTA to <a 6<="" a="" also="" contained="" href="https://www.usi.gov.au/Training-Organisations/Pages/Privacy-Notice.aspx also contained on page 6 of the enrolment form. I give my permission to ACTA to of the enrolment form. I give my permission to ACTA to <a 6<="" a="" also="" contained="" href="https://www.usi.gov.au/Training-Organisations/Pages/Privacy-Notice.aspx also contained on page 6 of the enrolment form. I give my permission to ACTA to of the enrolment form. I give my permission to ACTA to <a 6<="" a="" also="" contained="" href="https://www.usi.gov.au/Training-Organisations/Pages/Privacy-Notice.aspx also contained on page 6 of the enrolment form. I give my permission to ACTA to of the enrolment form. I give my permission to ACTA to <a 6<="" a="" also="" contained="" href="https://www.usi.gov.au/Training-Organisations/Pages/Privacy-Notice.aspx also contained on page 6 of the enrolment form. I give permission to ACTA to of the enrolment form. I give permission to ACTA to <a 6<="" a="" also="" contained="" href="https://www.usi.gov.au/Training-Organisations/Pages/Privacy-Notice.aspx also contained on page 6 of the enrolment form. I give permission to ACTA to of the Student Identifiers Act 2014 I give permission to
In accordance with section 11 of the Student Identifiers Act 2014 ACTA will securely destroy all personal information which is collected from individuals solely for the purpose of applying for a USI as soon as practicable (after the application has been made or when the information is no longer needed for that purpose, unless required by or under any law to retain it

12. Referral		
How did you hear about RTO NAME?	☐ Website☐ TV/Radio advertising☐ Newspaper Advertising☐ Job network	☐ Employer☐ Friend/ Family☐ Social Media☐ Other



13. Declarations and Consent

All information provided to ACTA as part of the enrolment process is true and correct to the best of my knowledge and understanding. I am aware of the consequences that may arise from providing false, misleading or incomplete information, including the cancellation of my enrolment or the withdrawal of the offer made.				
I understand that personal information collected by ACTA may be supplied to, and used by governments and other agencies for administration, regulation and research. I understand that my information may be disclosed to my employer (if I am enrolled in training paid by my employer) or school (if I am a school based apprentice /trainee or VET in Schools student) if applicable. I consent for the information collected to be used, and disclosed by ACTA in accordance with legal, regulatory and data provision requirements.				
I understand that I may receive a National Centre for Vocational Education	Research (NCVER) student survey.	□ Yes □ No		
I would like to enrol in this course having been provided with sufficient information (e.g. student handbook, pre- enrolment information, and course and fee information) in which to make an informed decision prior to enrolment.				
I agree to the fee/s being charged, payment terms and refund policy and procedure.				
I am aware of my rights and responsibilities as a student and agree to abide by the policies and procedures of the organisation outlined in the Student Handbook and on the ACTA Website.				
I agree for photos taken in the course of training to be used in marketing/advertising materials including social media and to receive marketing correspondence through SMS text/email. I understand that any photos taken will not be provided to another party without my consent. I understand that I can opt out of receiving marketing material at any point in time.				
I have read the student information Handbook on found on: www.actacollege.edu.au and is available on request at the front desk.				
Full Name:				
Signature:	Day / Month/ Year:			
Parent/Guardian Name: Parent /Guardian Signature:				
Required if Student is under 18 years of age Required if Student is under 18 years of age Required if Student is under 18 years of age				
required in elastic to dilater to yours of ago	required if eluderic is under 10 years of age			



Australian Government 2016 USI Privacy Notice

Instructions: The following information is provided to you on behalf of the Student Identifiers Registrar (Registrar) <u>www.usi.gov.au</u> <u>when an RTO applies for a USI on behalf of a student. It is a requirement of your enrolment that you read the below information prior to the provision of consent.</u>

You are advised and agree that you understand and consent that the personal information you provide in connection with your application for a Unique Student Identifier (USI):

- is collected by the Registrar as authorised by the Student Identifiers Act 2014.
- is collected by the Registrar for the purposes of:
 - applying for, verifying and giving a USI;
 - o resolving problems with a USI; and
 - creating authenticated vocational education and training (VET) transcripts;
- · may be disclosed to:
 - Commonwealth and State/Territory government departments and agencies and statutory bodies performing functions relating to VET for:
 - the purposes of administering and auditing VET, VET providers and VET programs;
 - education related policy and research purposes; and
 - to assist in determining eligibility for training subsidies;
 - VET Regulators to enable them to perform their VET regulatory functions;
 - VET Admission Bodies for the purposes of administering VET and VET programs;
 - current and former Registered Training Organisations to enable them to deliver VET courses to the individual, meet their reporting obligations under the VET standards and government contracts and assist in determining eligibility for training subsidies;
 - schools for the purposes of delivering VET courses to the individual and reporting on these courses;
 - the National Centre for Vocational Education Research for the purpose of creating authenticated VET transcripts, resolving problems with USIs and for the collection, preparation and auditing of national VET statistics;
 - o researchers for education and training related research purposes;
 - o any other person or agency that may be authorised or required by law to access the information;
 - any entity contractually engaged by the Student Identifiers Registrar to assist in the performance of his or her functions in the administration of the USI system; and
- will not otherwise be disclosed without your consent unless authorised or required by or under law.

The consequences for not providing the Registrar with some or all of your personal information are that the Registrar will not be able to issue you with a USI.

Privacy policies and complaints

You can find further information on how the Registrar collects, uses and discloses the personal information about you in the Registrar's Privacy Policy or by contacting the Registrar on usi@education.gov.au or telephone the Skilling Australia Information line on 13 38 73, international enquiries +61 3 5454 5280. The Registrar's Privacy Policy contains information about how you may access and seek correction of the personal information held about you and how you may make a complaint about a breach of privacy by the Registrar in connection with the USI and how such complaints will be dealt with.

You may also make a complaint to the Information Commissioner about an interference with privacy pursuant to the *Privacy Act* 1988, including in relation to the misuse or interference of or unauthorised collection, use, access, modification or disclosure of USIs.