

**2020 ENROLMENT FORM
 PRE-ACCREDITED TRAINING**

Office Use Only:

Fee for Service	ACE	
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PROGRAM INFORMATION

Course Name:

Enrolment Date...../..2020

Commencement Date:/.. 2020

PERSONAL INFORMATION

Given Name: Family name:

Date of birth: (Day/Month/Year)

Gender: Male

Female

...../...../.....

Other

Residential Address (where you usually live):

.....

Postcode:

Postal Address: (If different from above)

.....

Postcode:

Telephone: (H)..... (W)..... (M).....

Email Address: Email address alternative:

Please tick preferred contact method: email mobile mail

Are you a current concession card holder? Yes No (We are required to keep a copy)

Commonwealth Health Care Card Pensioner Health Care Card Vet Gold Card

Card Number: Expiry Date:

Emergency Contact Name: Relationship:

Phone number mobile/ land line number:

LANGUAGE AND CULTURAL DIVERSITY

In which country were you born?

Are you an Australian Citizen, Permanent Resident or a New Zealand citizen?

Please tick Yes No

One of the following proof of citizenship or permanent residency documents must be provided to be photocopied:

Green Medicare Card Australian Birth Certificate Current AUS/NZ Passport

Naturalization Certificate Confirmation of Residency by the Department of Immigration

Do you speak a language other than English at home? No, English only Yes (please specify)

Are you Aboriginal or Torres Strait Islander Origin?

Neither Aboriginal and/or Torres Strait Islander

DISABILITY

Do you consider yourself to have a disability? Yes No

- Hearing/deaf Acquired Brain Impairment Physical
 Vision Intellectual Medical Condition
 Mental Illness Learning Other

EDUCATION

Are you still enrolled at a secondary school? Yes No

Highest School Level completed

- Year 8 or lower Year 9 or equivalent Year 10 or equivalent
 Year 11 or equivalent Year 12 or equivalent never attended school

Year Completed:

Have you successfully completed any of the following qualifications? (please tick)

A – Australian	E – Australian Equivalent	I - International		
		A	E	I
Bachelor Degree or higher Degree		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advanced Diploma or Associate Degree		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diploma or Associate Diploma		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Certificate IV or Advanced Certificate/Technician		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Certificate III or Trade Certificate		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Certificate II		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Certificate I		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Certificates other than the above		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

EMPLOYMENT

Current Employment Status

- Full time employee Part time employee Unemployed, seeking full time work
 Self Employed – employing others Self-employed with no employees Unemployed, seeking part time work
 Not employed - not seeking work Employed - unpaid worker in a family business

Current Employment Classification

- Manager Professional Technician/Trade Worker
 Clerical/Administrative Worker Sales Worker Community/Personal Service Worker
 Machinery Operator/Driver Labourer Other

Current Industry Classification

- Agriculture, Forestry, Fishing Mining Manufacturing
 Construction Wholesale Trade Electricity, Gas, Water & Waste Services
 Retail Trade Accomodation & Food Services Transport, Postal & Warehousing
 Financial & Insurance Services Rent, Hiring & Real Estate Services Information media & telecommunication
 Administrative & Support Services Public Administration & Safety Professional, Scientific & Technical
 Education & Training Health Care & Social Assistance Arts & Recreation Services

Other Services

Study Reason

Which of the following categories best describes your main reason for undertaking this course

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

VICTORIAN GOVERNMENT VET STUDENT ENROLMENT PRIVACY NOTICE

The Victorian Government, through the Department of Education and Training (the Department), develops, monitors and funds vocational education and training (VET) in Victoria. The Victorian Government is committed to ensuring that Victorians have access to appropriate and relevant VET services. Any personal information collected by the Department for VET purposes is protected in accordance with the *Privacy and Data Protection Act 2014* (Vic) and the *Health Records Act 2001* (Vic).

Collection of your data

Living & Learning Pakenham is required to provide the Department with student and training activity data. This includes personal information collected on this enrolment form. Living Learning Pakenham provides data to the Department in accordance with the Victorian VET Student Statistical Collection Guidelines, available at <http://www.education.vic.gov.au/training/providers/rto/Pages/datacollection.aspx>.

Use of your data

The Department uses student and training data, including personal information, for a range of VET purposes including administration, monitoring and planning, including interaction between the Department and Student where appropriate. The data may also be subjected to data analytics, which seek to determine the likelihood of certain events occurring (such as program or subject completion) which may be relevant to the services provided to the student.

Disclosure of your data

As necessary and where lawful, the Department may disclose data, including personal information, to its contractors, other government agencies, professional bodies and/or other organisations for VET-related purposes. In particular, this includes disclosure of VET student and training data to the Commonwealth and the National Centre for Vocational Education Research (NCVER).

Legal and Regulatory

The Department's collection and handling of enrolment data and VSNs is authorised under the Education and Training Reform Act 2006 (Vic). The Department is also authorised to collect and handle USIs in accordance with the Student Identifiers Act 2014 (Cth) and the Student Identifiers Regulation 2014 (Cth).

Survey participation

You may be contacted to participate in a survey conducted by NCVER or a Department-endorsed project, audit or review relating to your training. This provides valuable feedback on the delivery of VET programs in Victoria. Please note you may opt out of the NCVER survey at the time of being contacted.

Consequences of not providing your information

Failure to provide your personal information may mean that it is not possible for you to enrol in VET and/or to obtain a Victorian Government VET subsidy.

Access, correction and complaints

You have the right to seek access to or correction of your own personal information. You may also complain if you believe your privacy has been breached.

For further information, please contact Living & Learning Pakenham in the first instance by phone (5941 2389) or email (admin@livinglearning.org.au).

Further information

For further information about the way the Department collects and handles personal information, including access, correction and complaints, go to <http://www.education.vic.gov.au/Pages/privacypolicy.aspx>.

STUDENT DECLARATION AND CONSENT

I declare that the information I have provided to the best of my knowledge is true and correct.

I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Notice above.

STUDENT SIGNATURE: **Date:**



In accordance with the Education and Training Reform Act 2006, if you are under the age of 18 you are required to have your parent or guardian sign this enrolment form.

PARENT/ GUARDIAN NAME:

PARENT/ GUARDIAN SIGNATURE: **Date:**

**Parental/guardian consent is required for all students under the age of 18.*

ELECTRONIC ENROLMENTS please tick this box to confirm acknowledgement of the student declaration

PROMOTION AND NEWSLETTERS

I do not want to receive LLP's newsletters

I do not want to receive any further promotional material

Where did you find out about our centre and this training /course?

- Newspaper Word of Mouth Flyer Website Previous Student
 Display Work Safe Referral JSA Brochure
 Other, please specify

PHOTO RELEASE PERMISSION

I give permission for Living & Learning Pakenham to use any photographic material taken of myself during activities for promotions/advertising and media releases.

Yes No **Student Signature:**



***Parent/Guardian Signature:**

**Parental/guardian consent is required for all students under the age of 18.*

ELECTRONIC ENROLMENTS please tick this box to confirm photo release permission

PAYMENT DETAILS

Please Note: A completed student enrolment form and payment must be received to confirm your place in the course you wish to attend.

In Person 6B Henry Street Pakenham 	By Phone Credit Card Payment 5941 2389 	By Direct Deposit BSB: 633 000 A/C: 1057 22953 Ref: Surname & Initial 
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Only complete credit card details if paying via mail, email or fax.

Visa MasterCard Payment Amount: \$.....

Card No. ____ / ____ / ____ / ____ Expiry date: ____ / ____ 3 Digit CCV Number.....

Card holders Name: Signature:

OFFICE USE ONLY

Document Requirement Checklist	Yes / No or N/A	Staff Initial
Student Details in Vettrak		
Student details entered – checked for returning student		
Student enrolled and entered		
Is the student re-enrolling in the next enrolment period? If so, complete the Re-Enrolment Record (attached)		
Payment receipted and details recorded in the Payments Record (attached)		
State Funding Source checked and correct		
Fee Concession checked and correct		
Referral Source entered		
<input type="checkbox"/> FFS	<input type="checkbox"/> ACE Funded	
All Government Funded Programs		
Copy of proof of citizenship or permanent residency retained or scanned to Vettrak, <i>i.e. Medicare Card</i>		
Concession card photocopied		
Is the Concession card current at time of enrolment		
Job Seeker Agency Funded		
Student fee schedule given to student reflects non concession rate		
Job Seeker Referral form received (<i>for accredited courses only</i>)		
Purchase Order Received		
Tax Invoice created and given to finance		

Administration notes:

(Please date all notes)

Re-enrolment Record

Complete for each Enrolment Period the student is re-enrolling in

Enrolment Period 1	Enrolment Period 2	Enrolment Period 3	Enrolment Period 4	Enrolment Period 5	Enrolment Period 6
Dates	Dates	Dates	Dates	Dates	Dates
Payment Required? Y / N (Complete Payment Record)	Payment Required? Y / N (Complete Payment Record)	Payment Required? Y / N (Complete Payment Record)	Payment Required? Y / N (Complete Payment Record)	Payment Required? Y / N (Complete Payment Record)	Payment Required? Y / N (Complete Payment Record)
Staff Initial	Staff Initial	Staff Initial	Staff Initial	Staff Initial	Staff Initial

Payments Record

DATE OF PAYMENT	AMOUNT PAID	RECEIPT NUMBER	BALANCE