



2017 ENROLMENT FORM
NATIONALLY RECOGNISED
AND PRE-ACCREDITED TRAINING

Living & Learning Inc. TOID 3913
P O Box 457, Pakenham VIC 3810
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Office Use Only: Fee for Service ACE

PROGRAM INFORMATION

Course Name:
Enrolment Date: Course Commencement Date:

PERSONAL INFORMATION

Given Name: Family Name:

This must be the same as your application for a USI.

Please write the name that you use/d for your application for a USI (Unique Student Identifier), including any middle names.

Date of birth: Gender:

Residential Address: Postcode:

Postal Address: (If different from above) Postcode:

Telephone: (H) (W) (M)

Email Address:

Please tick preferred contact method: Email Mobile Mail

Are you a current concession card holder?

Yes No

Card Number: Expiry Date:

Emergency contact name: Relationship:

Phone number mobile/ land line number:

CULTURAL HERITAGE

In which country were you born?:

Are you an Australian Citizen or Permanent Resident? Yes No

If no, a holder of a permanent visa or confirmed as an Asylum seeker by the Asylum Seeker Resource Centre (ASRC) or confirmed as a Victim of human trafficking by the Australian Red Cross (ARC). Yes No

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

What Language do you speak at home?

How well do you speak English?

Are you Aboriginal, Koori or Torres Strait Islander Origin?

Neither Aboriginal and/or Torres Strait Islander

DISABILITY

Do you consider yourself to have a disability?

Yes **No**

EDUCATION

Are you still attending secondary school? **Yes** **No**

Highest School Level completed

Year Completed:

Have you successfully completed any of the following qualifications?

Bachelor Degree or higher Degree

Advanced Diploma or Associate Degree

Diploma or Associate Diploma

Certificate IV or Advanced Certificate/Technician

Certificate III or Trade Certificate

Certificate II

Certificate I

Certificates other than the above

EMPLOYMENT

Current Employment Status

.....

Current Employment Classification

.....

Current Industry Classification

.....

Study Reason

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

.....

Disclosure of your data

As necessary and where lawful, the Department of Education and Training may disclose VET data, including personal information, to its 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 of Education and Training’s collection and handling of enrollment data and VSNs is authorised under the *Education and Training Reform Act 2006* (Vic). The Department of Education and Training 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.

Consequences of not providing your information

Failure to provide your personal information may mean that it is not possible for you to enroll in and/or to obtain a Victorian Government 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 and Learning Pakenham Inc. administration in the first instance by email at admin@livinglearning.org.au or by phone on 5941 2389

Further information

For further information about the way the Department of Education and Training collects and handles personal information, including access, correction and complaints, go to:

<http://www.education.vic.gov.au/Pages/privacypolicy.aspx> .

For further information about Unique Student Identifiers, including access, correction and complaints, go to:

<http://www.usi.gov.au/Students/Pages/student-privacy.aspx> .

I acknowledge that I have read and agree to the Privacy Notice.

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

Other, please specify

PROMOTION AND NEWSLETTERS

I do not want to receive LLP’s newsletters

I do not want to receive any further promotional material

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.

STUDENT DECLARATION

I declare that the information I have provided is true and correct.





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

Parent/ Guardian Name:

Parent/ Guardian Signature: **Date:**

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 Mail PO Box 457 Pakenham 3810 	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		
Payment receipted and details recorded		
State Funding Source checked and correct		
Fee Concession checked and correct		
Referral Source entered		
FFS	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)