**Enrolment Form**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Qualification Code and Title** |  | | | | | | | | | |
| **1. Personal Details -** *Before you start completing this form, please read our ‘Privacy Notice’ and ‘Terms and Conditions’.*  *(Please write the name that you used when you applied for your Unique Student Identifier (USI), including any middle names. If you do not yet have a USI you must apply for a USI as part of your enrolment. For information on how to obtain an USI, please see section on the USI at the end of this form for a detailed explanation.)* | | | | | | | | | | |
| Applicants with single name only  (Tick this box if you have one name only that cannot be written in the following format. Write your single name in the ‘Family Name’ section). | | | | | | | | | | |
| **Family Name (Surname)** |  | | | | | | | | | |
| **First given Name** |  | | | | | | | | | |
| **Second given Name** |  | | | | | | | | | |
| **2. Date of Birth** |  | | **3. Gender** | | | | | | Male / Female / Other | |
| **4. Your contact details** | | | | | | | | | | |
| **Mobile Phone Number** |  | **Email Address** | | | | |  | | | |
| **5. What is the address of your usual residence?**  *(Please provide the physical address (street number and name* ***not*** *post office box) where you usually reside rather than any temporary address at which you reside for training, work or other purposes before returning to your home.*  *If you are from a rural area use the address from your state or territory’s ‘rural property addressing’ or ‘numbering’ system as your residential street address.*  *Building/property name is the official place name or common usage name for an address site, including the name of a building, Aboriginal community, homestead, building complex, agricultural property, park or unbounded address site.)* | | | | | | | | | | |
| Building/property name |  | | | | | | | | | |
| Flat/unit details |  | | | | | | | | | |
| Street name |  | | | | | | | | | |
| Suburb, locality or town |  | | | | | | | | | |
| State/territory |  | | | | Postcode: | | | | |  |
| **6. What is your postal address (if different from above)?** | | | | | | | | | | |
| Building/property name |  | | | | | | | | | |
| Flat/unit details |  | | | | | | | | | |
| Street name |  | | | | | | | | | |
| Suburb, locality or town |  | | | | | | | | | |
| State/territory |  | | | | | Postcode: | |  | | |
| **Language and Cultural Diversity** | | | | | | | | | | |
| 7. In which country were you born? | Australia  Other – please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| 8. Do you speak a language other than English at home? | *(If more than one language, indicate the one that is spoken most often)*  No, English only  Yes, other – please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| 9. 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 | | | | | | | | | |
| **Disability -** Before completing this section, please read the ‘Disability Supplement’ information provided here. | | | | | | | | | | |
| 10. Do you consider yourself to have a disability, impairment or long-term condition? | Yes  No *If ‘No’ – Go to question 12* | | | | | | | | | |
| 11. If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list: | *(You may indicate more than one area) Please refer to the ‘Disability Supplement’ for an explanation of the following disabilities.*  Hearing/deaf  Physical  Intellectual  Learning  Mental illness  Acquired brain impairment  Vision  Medical condition  Other | | | | | | | | | |
| **Schooling** | | | | | | | | | | |
| 12. What is your highest COMPLETED school level? *(Tick ONE box only)* | *If you are currently enrolled in secondary education, the highest school level completed refers to the highest school level you have actually completed and not the level you are currently undertaking. For example, if you are currently in Year 10 the highest school level completed is Year 9.*  *Year 12 or equivalent*  *Year 11 or equivalent*  *Year 10 or equivalent*  *Year 9 or equivalent*  *Year 8 or below*  *Never attended school (Never completed any primary or secondary level education – go to question 14)* | | | | | | | | | |
| 13. Are you still enrolled in secondary or senior secondary education? | Yes  No *If ‘No’ – Go to question 16* | | | | | | | | | |
| **Previous qualifications achieved** | | | | | | | | | | |
| 14. Have you SUCCESSFULLY completed any of the qualifications listed in question 15? | Yes  No *If ‘No’ – Go to question 16* | | | | | | | | | |
| 15. If ‘Yes’, tick ANY applicable boxes. | 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  Other education (including certificates or overseas qualifications not listed above) | | | | | | | | | |
| **Employment** | | | | | | | | | | |
| 16. Of the following categories, which BEST describes your current employment status? *(Tick one box only)* | *For casual, seasonal, contract and shift work, use the current number of hours worked per week to determine whether full time (35 hours or more per week) or part-time employed (less than 35 hours per week).*  Full-time employee  Part-time employee  Self-employed – not employing others  Self-employed – employing others  Employed – unpaid worker in a family business  Unemployed – seeking full-time work  Unemployed – seeking part-time work  Not employed – not seeking employment | | | | | | | | | |
| **Study Reason** | | | | | | | | | | |
| 17.Of the following categories, select the one which BEST describes the main reason you are undertaking this course/traineeship/apprenticeship *(Tick ONE box only)* | To get a job  To develop my existing business  To start my own business  To try for a different career  To get a better job or promotion  It was a requirement of my job  To get into another course of study  For personal interest or self-development  To get skills for community/voluntary work  Other reasons | | | | | | | | | |
| **Unique Student identifier (USI)**  *From 1 January 2015, Australian College can be prevented from issuing you with a nationally recognised VET qualification or statement of attainment when you complete your course if you do not have a Unique Student Identifier (USI). In addition, we are required to include your USI in the data we submit to NCVER. If you have not yet obtained a USI you can apply for it directly at* [*https://www.usi.gov.au/students/create-your-usi*](https://www.usi.gov.au/students/create-your-usi) *on your computer or mobile device.* | | | | | | | | | | |
| 18. Enter your Unique Student Identifier (USI) *(if you already have one)* | *You may already have a USI if you have done any nationally recognised training, which could include training at work, completing a first aid course or RSA (Responsible Service of Alcohol) course, getting a white card, or studying at a TAFE or training organisation. It is important that you try to find out whether you already have a USI before attempting to create a new one. You should not have more than one USI. To check if you already have a USI, use the ‘Forgotten USI’ link on the USI website at* [*https://www.usi.gov.au/faqs/i-have-forgotten-my-usi/*](https://www.usi.gov.au/faqs/i-have-forgotten-my-usi/)*.*  U:\USIbox.gif | | | | | | | | | |
| To ensure the authenticity of your USI, Australian College must verify the information available on the USI Register. Please, provide details for **one** of the forms of identity below. You must ensure that the name written in ‘Personal Details’ section of this Enrolment Form is exactly the same as written in the document you provide below. | | | | | | | | | | |
| 1. Australian Driver’s licence | State: \_\_\_\_\_\_\_\_\_\_\_ Licence Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| 2. Medicare Card | Medicare card number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Individual reference number (next to your name on Medicare card): \_\_  Card colour: (select which applies)  Green  Expiry date \_\_\_\_\_\_/\_\_\_\_\_ *(format MM/YYYY)*  Yellow  Blue  Expiry date \_\_\_/\_\_\_\_\_\_/\_\_\_\_ *(format DD/MM/YYYY)* | | | | | | | | | |
| 3. Australian Birth Certificate | State/Territory \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *Details vary according to State/Territory (see note above)* | | | | | | | | | |
| 4. Australian Passport | Passport Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| 5. Non-Australian Passport *(with Australian Visa)* | Passport Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| 6. Immicard | Immicard Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| 7. Citizenship Certificate | Stock Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| 8. Certificate of Registration by Descent | Acquisition date \_\_\_/\_\_\_\_\_\_/\_\_\_\_ *(format DD/MM/YYYY)* | | | | | | | | | |
| ***Note:*** *In accordance with section 11 of the Student Identifiers Act 2014, Australian College will securely destroy personal information which we collect from individuals solely for the purpose of verifying the USI on the student’s behalf as soon as the verification process is complete or the information is no longer needed for that purpose.*  *A photo ID is required as part of Australian College enrolment process – this will be kept on the student’s file for the duration of the enrolment or as required by relevant laws and legislation. For more information, see Australian College Privacy Policy and Student Record Management Policy.* | | | | | | | | | | |
| I have read and understand the Student Handbook  I have read and agree to the Enrolment Terms and Conditions  I have read and agree to the Australian College Fees and Charges  I have read and understand the Privacy Notice  I have read and understand the Disability Supplement  I will send a copy of my travel documents to: [traveldoc@australiancollege.edu.au](mailto:traveldoc@australiancollege.edu.au) and consent to have these verified via VEVO visa check. | | | | | | | | | | |
| **Student Signature:** | | | | Date: | | | | | | |