



## 2019 ENROLMENT FORM

**How to Enrol:** Complete all sections of the Enrolment Form and forward to AVTES. Enrolment in your qualification becomes effective on the commencement of your training plan, schedule, class or workshop.

**Fees and Charges:** The Enrolment Fee charged is in accordance with regulations/guidelines and determined by the course or program you enrol in. All participants are required to pay Enrolment Fees. Further information on fees and charges, refunds and concession eligibility is available in the Fees and Charges information.

**Recognition of Prior Learning:** Participants who have completed a course or who have gained the appropriate skills may wish to apply for recognition of this previous training, learning or experience known as RPL. Further information on how to apply for RPL is available.

### PRIVACY STATEMENT

Australian Vocational Training & Employment Services P/L (AVTES) collects and stores information specific to your enrolment and training. This information is handled confidentially and stored securely. AVTES privacy policy is available at <http://www.avtes.com.au/compliance-audit-results-quality-indicators-reports-privacy-policy/avtes-privacy-policy-student-data/>. For further information, contact AVTES by phone 1300 764 418 or email [info@avtes.com.au](mailto:info@avtes.com.au).

#### National VET Data Privacy Notice

Under the Data Provision Requirements 2012, AVTES is required to collect personal information about you and to disclose that personal information to the National Centre for Vocational Education Research Ltd (NCVER).

Your personal information (including the personal information contained on this enrolment form and your training activity data) may be used or disclosed by AVTES for statistical, regulatory and research purposes. AVTES may disclose your personal information for these purposes to third parties, including School – if you are a secondary student undertaking VET, including a school-based apprenticeship or traineeship, Employer – if you are enrolled in training paid by your employer, Commonwealth and State or Territory government departments and authorised agencies, NCVER, Organisations conducting student surveys and Researchers.

Personal information disclosed to NCVER may be used or disclosed for the following purposes:

- Issuing a VET Statement of Attainment or VET Qualification, and populating Authenticated VET Transcripts;
- facilitating statistics and research relating to education, including surveys;
- understanding how the VET market operates, for policy, workforce planning and consumer information; and
- administering VET, including program administration, regulation, monitoring and evaluation.

You may receive an NCVER student survey which may be administered by an NCVER employee, agent or third party contractor. You may opt out of the survey at the time of being contacted.

NCVER will collect, hold, use and disclose your personal information in accordance with the Privacy Act 1988 (Cth), the VET Data Policy and all NCVER policies and protocols (including those published on NCVER's website at [www.ncver.edu.au](http://www.ncver.edu.au)).

#### 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:** AVTES is required to provide the Department with student and training activity data. This includes personal information collected in the AVTES enrolment form and unique identifiers such as the Victorian Student Number (VSN) and the Commonwealth's Unique Student Identifier (USI). AVTES 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. A student's USI may be used for specific VET purposes including the verification of student data provided by AVTES; the administration and audit of VET providers and programs; education-related policy and research purposes; and to assist in determining eligibility for training subsidies.

**Disclosure of your data:** As necessary and where lawful, the Department may disclose VET 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 AVTES's Privacy Officer in the first instance by phone 1300 764 418 or email [info@avtes.com.au](mailto:info@avtes.com.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>. 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 declare that the information I have provided to the best of my knowledge is true and correct.
- I acknowledge and agree to the terms described in this Privacy Statement, and by signing this form I acknowledge I have read the National VET Data Privacy Notice and the Victorian Government's VET Student Enrolment Privacy Notice as above and consent to AVTES collecting, using, holding and disclosing my Personal Information to the Department for the purposes of the VET Funding Contract and management of the Skills First Program.
- I have read and understood the AVTES Student Handbook and I agree to meet my program requirements and within timeframes.
- I understand that I may receive a NCVER student survey.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(Parental/guardian consent is required for all students under the age of 18)

## PERSONAL DETAILS

### 1. ENTER YOUR FULL NAME

Please write the name that you used when you applied for your Unique Student Identifier (USI), including any middle names.

Surname (legal family name)

Given names (legal given names)

### 2. ENTER YOUR BIRTH DATE

Date of Birth (DAY/MONTH/YEAR)   /   /

### 3. GENDER (please tick ONE box only)

Male  Female  Indeterminate/Intersex/Unspecified

### 4. ENTER YOUR CONTACT DETAILS

Home Phone           Work Phone

Mobile           Email

### 5. WHAT IS THE ADDRESS AND POSTCODE OF THE SUBURB, LOCALITY OR TOWN IN WHICH YOU USUALLY LIVE?

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's or territory's 'rural property addressing' or 'numbering' system as your residential street address.

Building / property name

Flat / unit number     Street number

Street name

Suburb, locality or town

State / Territory    Postcode

### 6. WHAT IS YOUR POSTAL ADDRESS? (if different from above)

Building / property name

Flat / unit number     Street number     PO Box / Roadside Delivery Box

Street name

Suburb, locality or town

State / Territory    Postcode

## LANGUAGE & CULTURAL DIVERSITY

### 7. IN WHICH COUNTRY WERE YOU BORN?

Australia  Other – please specify:

Are you an Australian Citizen?  Yes  No If not, are you a permanent resident in Australia?  Yes  No

### 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 & Torres Strait Islander origin, mark BOTH 'Yes' boxes)

No  Yes, Aboriginal  Yes, Torres Strait Islander

## DISABILITY

### 10. DO YOU CONSIDER YOURSELF TO HAVE A DISABILITY, IMPAIRMENT OR LONG-TERM CONDITION?

Yes  No – go to question 12

### 11. IF YES, PLEASE INDICATE THE AREAS OF DISABILITY, IMPAIRMENT OR LONG TERM CONDITION: (you may indicate more than one area)

Physical  Intellectual  Acquired brain impairment  Hearing/deaf  Other  
 Vision  Mental illness  Medical condition  Learning

Do you need any special assistance from AVTES because of this disability?  Yes  No

## EDUCATION

**12. WHAT IS YOUR HIGHEST COMPLETED SCHOOL LEVEL? (please tick ONE box only)**

- Completed year 12     
  Completed year 11     
  Completed year 10     
  Completed year 9 or equivalent  
 Completed year 8 or lower     
  Never attended school – go to question 14

**13. ARE YOU STILL ATTENDING SECONDARY SCHOOL?**

- No     
  Yes, name of school:

**14. HAVE YOU SUCCESSFULLY COMPLETED ANY OF THE QUALIFICATIONS LISTED IN QUESTION 15?**

- No – go to question 16     
  Yes – go to question 15

**15. IF YES, PLEASE ENTER ONE OF THESE PRIOR EDUCATION ACHIEVEMENT RECOGNITION IDENTIFIERS TO ANY APPLICABLE QUALIFICATION LEVEL: (A – Australian, E – Australian Equivalent, I – International)**

If you have multiple Prior Education Achievement Recognition Identifiers for any one qualification, use the following priority order to determine which identifier to use:  
 1 = A, 2 = E, 3 = I

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

## EMPLOYMENT

**16. OF THE FOLLOWING CATEGORIES, WHICH BEST DESCRIBES YOUR CURRENT EMPLOYMENT STATUS? (please tick ONE box only)**

- 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

Workplace Name

Workplace Address

Postcode

Phone       Mobile

Supervisor       Email

**17. WHICH OF THE FOLLOWING CLASSIFICATIONS BEST DESCRIBES YOUR CURRENT OR RECENT OCCUPATION? (please tick ONE box only)**

*If never employed go to question 21*

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> 1 – Managers                     | <input type="checkbox"/> 4 – Community and Personal Service Workers | <input type="checkbox"/> 7 – Machinery Operators and Drivers |
| <input type="checkbox"/> 2 – Professionals                | <input type="checkbox"/> 5 – Clerical and Administrative Workers    | <input type="checkbox"/> 8 – Labourers                       |
| <input type="checkbox"/> 3 – Technician and Trade Workers | <input type="checkbox"/> 6 – Sales Workers                          | <input type="checkbox"/> 9 – Other                           |

**18. WHICH OF THE FOLLOWING CLASSIFICATIONS BEST DESCRIBES THE INDUSTRY OF YOUR CURRENT OR PREVIOUS EMPLOYER? (please tick ONE box only)**

*If never employed go to question 21*

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> A – Agriculture, Forestry, Fishing          | <input type="checkbox"/> G – Retail Trade                             | <input type="checkbox"/> M – Professional, Scientific, Technical Services |
| <input type="checkbox"/> B – Mining                                  | <input type="checkbox"/> H – Accommodation and Food Services          | <input type="checkbox"/> N – Administrative and Support Services          |
| <input type="checkbox"/> C – Manufacturing                           | <input type="checkbox"/> I – Transport, Postal and Warehousing        | <input type="checkbox"/> O – Public Administration and Safety             |
| <input type="checkbox"/> D – Electricity, Gas, Water, Waste Services | <input type="checkbox"/> J – Information Media and Telecommunications | <input type="checkbox"/> P – Education and Training                       |
| <input type="checkbox"/> E – Construction                            | <input type="checkbox"/> K – Financial and Insurance Services         | <input type="checkbox"/> Q – Health Care and Social Assistance            |
| <input type="checkbox"/> F – Wholesale Trade                         | <input type="checkbox"/> L – Rental, Hiring, Real Estate Services     | <input type="checkbox"/> R – Arts and Recreation Services                 |
|  |   | <input type="checkbox"/> S – Other Services                               |

## STUDY REASON

**19. OF THE FOLLOWING CATEGORIES, WHICH BEST DESCRIBES YOUR MAIN REASON FOR UNDERTAKING THIS PROGRAM / APPRENTICESHIP / TRAINEESHIP? (please 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  
 I wanted extra skills for my job     
  To get into another program of study     
  For personal interest or self-development  
 Other reasons     
  To get skills for community/voluntary work

## VICTORIAN STUDENT NUMBER AND UNIQUE STUDENT IDENTIFIER

**20. Enter your Victorian Student Number (VSN)?** *To be completed by all students aged up to 24 years.*

If you provided VSN go to question 21

**Have you attended any Victorian school since 2009 or done any training with a vocational education and training (VET) registered training organisation or an Adult and Community Education provider in Victoria since 2011?**

No – I have not attended a Victorian school since 2009 or a TAFE or other VET training provider since the beginning of 2011. – If you answered **NO** go to question 21

Yes – I have attended a Victorian school since 2009. Most recent Victorian school attended: Name: \_\_\_\_\_  
 and / or

Yes – I have participated in training at a TAFE or other training organisation since the beginning of 2011.  
 List the most recent training organisations with which you have participated in training in Victoria since 2011 (list up to 3 training organisations):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**21. ENTER YOUR UNIQUE STUDENT IDENTIFIER (if you already have one)**

From 1 January 2015, AVTES can be prevented from issuing you with a nationally recognised VET qualification or statement of attainment when you complete your program if you do not have a Unique Student Identifier (USI). If you have not yet obtained a USI, you can apply for it directly at <http://www.usi.gov.au/create-your-USI/> on computer or mobile device. Further information can be found on the “Student Information on the Unique Student Identifier” factsheet, included in your enrolment pack. If you have been granted a USI exemption, the results of the training will not be accessible through the Commonwealth and will not appear on any authenticated VET transcript prepared by the Registrar.

## COURSE INFORMATION

**22. WHAT QUALIFICATION(S) ARE YOU ENROLLING IN?**

<input type="checkbox"/> Certificate III in Hospitality <small>SIT30616</small>	<input type="checkbox"/> Certificate IV in Hospitality <small>SIT40416</small>	<input type="checkbox"/> Diploma of Hospitality Management <small>SIT50416</small>
<input type="checkbox"/> Certificate III in Commercial Cookery <small>SIT30816</small>	<input type="checkbox"/> Certificate IV in Commercial Cookery <small>SIT40516</small>	<input type="checkbox"/> Advanced Diploma of Hospitality Management <small>SIT60316</small>
<input type="checkbox"/> Certificate III in Hospitality (Restaurant Front of House) <small>SIT30716</small>		

**23. DO YOU WISH TO APPLY FOR RECOGNITION OF PRIOR LEARNING (RPL)?**

No
  Yes, if **YES**, please request an RPL Candidate Information Form – Initial Application

**24. DO YOU HAVE A CONCESSION CARD FOR THE CURRENT YEAR?**

No
  Yes, if **YES**, please provide a copy to your Trainer Assessor

**25. FEE WAIVER**

Are you a prisoner from the Judy Lazarus Transition Centre or a young person required to undertake a course pursuant to a community based order?
  Yes  No

If **YES** please provide written confirmation from either the Judy Lazarus Transition Centre or the relevant Youth Justice Unit

## EMERGENCY CONTACT

Name

Phone Number                
 Relationship

## OFFICE USE ONLY

Student No.:  Qual. Code(s)  Previous Enrolment Withdrawn  Yes  N/A

Date Processed  Enrolment taken by

SFP Purchasing Contract #           *(If applicable) (N.B. Must be the contract year training commences)*

SFP Eligibility Checklist completed      SFP Eligibility Exemption Indicator set to Y in ICARE  Yes  N/A

USI verified       Survey Contact Status       ICARE completed       Follow up list updated

(enter code selected)