



# Student Enrolment

## Student Details:

Application Date: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  Male  Female  Other

Home Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Post Code: \_\_\_\_\_ Age Declaration:

Postal Address: \_\_\_\_\_  I am OVER 18 years of age

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Post Code: \_\_\_\_\_  I am UNDER 18 years of age

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Mobile #: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Main Language Spoken: \_\_\_\_\_ City of Birth: \_\_\_\_\_

Do you speak a language other than English at home?  No  Yes, other: \_\_\_\_\_

What level of computer literacy do you have?  Excellent  Good  Basic  Poor

How do you rate your numeracy skills?  Excellent  Good  Basic  Poor

## Course Enrolment and Employment Details:

Employer Business Name: \_\_\_\_\_ Employer Contact: \_\_\_\_\_

Employer Address: \_\_\_\_\_ Course Name: \_\_\_\_\_

Course Duration: \_\_\_\_\_ Course Delivery: \_\_\_\_\_ Course Code: \_\_\_\_\_

Employment Status:

- 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

## Education and Training Details:

Are you able to read, write and understand English?  Yes  No Do you have access to a computer and the internet?  Yes  No

What is your highest COMPLETED school level? (tick one 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 10 or equivalent  Year 8 or below
- Year 11 or equivalent  Year 9 or equivalent  Never attended school

Are you still enrolled in secondary or senior secondary education?

Yes  No

In which YEAR did you complete that school level? \_\_\_\_\_

Have you successfully completed any of the following qualifications? (please select all that apply)

- Certificate I  Certificate II  Certificate III (Trade Cert)
- Certificate IV (Advanced Cert)  Diploma  Advance Diploma / Associate Degree
- Bachelor Degree or Higher  Other  None

Encourage Training College | RTO # 45622  
Address: Level 1, 42 Queen Street, Auburn, NSW 2144  
Website: [www.etccollege.com.au](http://www.etccollege.com.au) | Email: [info@etccollege.com.au](mailto:info@etccollege.com.au)



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## Reason for Study:

Of the following categories, which BEST describes your main reason for undertaking this course?

- To get a job
- To get better job/position
- It was a requirement for my job
- I wanted extra skills for my job
- To start my own business
- To get into another course of study
- To try a different career
- To develop my existing business

## Cultural Diversity:

In which country were you born? \_\_\_\_\_

Are you Aboriginal and/or Torres Strait Islander? (please tick all that applies)

- No
- Yes, Aboriginal
- Yes, Torres Strait Islander

## Disability: (Please see 'Disability Supplement' section)

Do you have any disability, impairment or long-term condition which may affect your course?

- Yes
- No

Do you live with any physical/mental disability that may affect your participation in the course?

- Hearing/Deaf
- Physical
- Intellectual
- Medical Condition
- Mental Illness
- Vision
- Learning
- Other: \_\_\_\_\_
- Acquired brain impairment

Do you require additional support?  No  Yes (please specify: \_\_\_\_\_)

## Existing Skills and Knowledge:

Please describe any related work or industry experience (job role, description of responsibilities, inclusive dates, etc.) you have, if any:

Please list down any related qualifications you currently hold, if any:

Qualification Title and Code	Provider Name	Date Studied



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## IMPORTANT NOTE:

Encourage Training College will provide access to additional support services where required, as described in the Additional Support Policy and Procedures. However, where a student is unable to meet minimum course entry requirements such as corresponding Learning, Literacy and Numeracy Skills and/or Physical Fitness requirements of a course, Encourage Training College reserves the right to defer/terminate enrolment. If you are in doubt, please ask us about it.

## Unique Student Identifier:

A Unique Student Identifier (USI) is a reference number made up of numbers and letters that gives students access to their USI account. A USI will allow an individual's USI account to be linked to the National Vocational Education and Training (VET) Data Collection allowing an individual to see all of their training results from all providers including all completed training units and qualifications.

For more details please refer to "Unique Student Identifier (USI)" [www.usi.gov.au/](http://www.usi.gov.au/)

1. Enter your Unique Student Identifier (if you already have one)

**Unique Student Identifier:** \_\_\_\_\_

2. If you don't have a USI number, you can apply for one by going to the USI website [www.usi.gov.au](http://www.usi.gov.au) and follow the steps here: <https://www.usi.gov.au/students/how-do-i-create-usi>

## Declaration:

I understand that I will be required to supply a USI to Encourage Training College in accordance with national legislation. I declare that I have answered all questions truthfully to the best of my knowledge. I understand that all my personal details including my USI, are confidential and are protected by relevant privacy laws. I give my consent to Encourage Training College to release my name, date of birth, contact details and statistical information, including my USI, to the relevant Federal government bodies for the purpose of auditing, regulation of training, obtaining feedback and as statistical information. I have read and consent to the collection, use and disclosure of my personal information pursuant to the information detailed at <https://www.usi.gov.au/training-organisations/usi-support-materials/provacy-notice-students-when-applying-usi-their-o> and I understand that I may receive a National Centre for Vocational Education Research (NCVER) student survey.

**Student Name and Signature:** \_\_\_\_\_

\*If you have an objection to being assigned a Unique Student Identification Number (USI), you are able to apply for an exemption, directly to the Student Identifiers Registrar at [www.usi.gov.au](http://www.usi.gov.au) Please be advised that

- Encourage Training College will be unable to issue your Statement of Attainment or Certificate upon completion of your study and training without a USI
- Where the USI exemption applies, the results of the training will not be accessible through the Commonwealth and will not appear on any authenticated VET transcript

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## Privacy Notice and Policy:

*Under the Data Provision Requirements 2012, Encourage Training College 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), may be used or disclosed by Encourage Training College for statistical, administrative, regulatory and research purposes. Encourage Training College may disclose your personal information for these purposes to:*

- *Commonwealth and State or Territory government departments and authorised agencies; and*
- *NCVER.*

*Personal information that has been disclosed to NCVER may be used or disclosed by NCVER for the following purposes:*

- *populating authenticated VET transcripts;*
- *facilitating statistics and research relating to education, including surveys and data linkage;*
- *pre-populating RTO student enrolment forms;*
- *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 a student survey which may be administered by a government department or NCVER employee, agent or third party contractor or other authorised agencies. Please note 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 National 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)).*

*The primary purpose in collecting your information is to fulfil our business commitments to you in providing education and training. We may use the information you provide to help improve the services we deliver to you, measure interest in our services, inform you of other products and services or to comply with requirements under the law. We shall not otherwise disclose your personal information to any other party without your consent and we do not sell personal information to third parties.*



# Student Enrolment

## Refund Policy:

*Details of the Encourage Training College Fees and Charges / Refund Policy can be found in the Fee Administration and Refund Policy, Student Handbook and Encourage Training College website [www.etccollege.com.au](http://www.etccollege.com.au)*

## Declaration:

I, \_\_\_\_\_  
(First, middle and last Name)

Of, \_\_\_\_\_  
(current residential address)

With date of birth: \_\_\_\_\_

*Would like to apply for enrolment in the above course with Encourage Training College (RTO #45622). I have read and understood the entry and course requirements and other course information on the Encourage Training College website. I have read the Encourage Training College Student Handbook including the Fee Administration and Refund Policy, and other policies and procedures prior to enrolling.*

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signed: \_\_\_\_\_



# Student Enrolment

## Payment Options:

Only \$ \_\_\_\_\_  
(Total of \$ \_\_\_\_\_)

## Payment Details:

*(Select ONE Payment Method)*

- Cheque
- Credit Card
- Direct Debit
- Electronic Transfer

<b>Account Name:</b> _____	<b>BSB:</b> _____
<b>Bank:</b> _____	<b>Account Number:</b> _____

### Office Use Only:

Student #: \_\_\_\_\_ Enrolment #: \_\_\_\_\_

Entered     Receipt     Access  
 Invoice     Upload Form

Enrolment Coordinator: \_\_\_\_\_

## Credit Card Authorisation

I, \_\_\_\_\_ (Name) authorise Encourage Training College to debit \_\_\_\_\_ (Amount) from the following credit card for the purpose of enrolling into training. For both upfront payments and payment plan amounts, please debit my card as per the selected payment option above according to the following details:

Card Type (tick one only):     VISA     Mastercard

Card Number: \_\_\_\_\_

Expiry: \_\_\_\_ / \_\_\_\_

Card Holders Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Disability Supplement

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### **Introduction:**

*The purpose of the Disability supplement is to provide additional information to assist with answering the disability question.*

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*Disability in this context does not include short-term disabling health conditions such as a fractured leg, influenza, or corrected physical conditions such as impaired vision managed by wearing glasses or lenses.*

### **'11 — Hearing/deaf'**

*Hearing impairment is used to refer to a person who has an acquired mild, moderate, severe or profound hearing loss after learning to speak, communicates orally and maximises residual hearing with the assistance of amplification. A person who is deaf has a severe or profound hearing loss from, at, or near birth and mainly relies upon vision to communicate, whether through lip reading, gestures, cued speech, finger spelling and/or sign language.*

### **'12 — Physical'**

*A physical disability affects the mobility or dexterity of a person and may include a total or partial loss of a part of the body. A physical disability may have existed since birth or may be the result of an accident, illness, or injury suffered later in life; for example, amputation, arthritis, cerebral palsy, multiple sclerosis, muscular dystrophy, paraplegia, quadriplegia or post-polio syndrome.*

### **'13 — Intellectual'**

*In general, the term 'intellectual disability' is used to refer to low general intellectual functioning and difficulties in adaptive behaviour, both of which conditions were manifested before the person reached the age of 18. It may result from infection before or after birth, trauma during birth, or illness.*

### **'14 — Learning'**

*A general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities. These disorders are intrinsic to the individual, presumed to be due to central nervous system dysfunction, and may occur across the life span. Problems in self-regulatory behaviours, social perception, and social interaction may exist with learning disabilities but do not by themselves constitute a learning disability.*

### **'15 — Mental illness'**

*Mental illness refers to a cluster of psychological and physiological symptoms that cause a person suffering or distress and which represent a departure from a person's usual pattern and level of functioning.*

### **'16 — Acquired brain impairment'**

*Acquired brain impairment is injury to the brain that results in deterioration in cognitive, physical, emotional or independent functioning. Acquired brain impairment can occur as a result of trauma, hypoxia, infection, tumour, accidents, violence, substance abuse, degenerative neurological diseases or stroke. These impairments may be either temporary or permanent and cause partial or total disability or psychosocial maladjustment.*

### **'17 — Vision'**

*This covers a partial loss of sight causing difficulties in seeing, up to and including blindness. This may be present from birth or acquired as a result of disease, illness or injury.*

### **'18 — Medical condition'**

*Medical condition is a temporary or permanent condition that may be hereditary, genetically acquired or of unknown origin. The condition may not be obvious or readily identifiable, yet may be mildly or severely debilitating and result in fluctuating levels of wellness and sickness, and/or periods of hospitalisation; for example, HIV/AIDS, cancer, chronic fatigue syndrome, Crohn's disease, cystic fibrosis, asthma or diabetes.*

### **'19 — Other'**

*A disability, impairment or long-term condition which is not suitably described by one or several disability types in combination. Autism spectrum disorders are reported under this category.*