241 Station Road, Melton, Vic 3337

Telephone: (03) 8746 1000 Email: <u>info@djerriwarrh.org</u> TOID: 3771; ABN: 57 816 895 087



2022 Pre-Accredited Enrolment Form

Please identify the c	ourse you are enrolling	g in:	
Let's Speak in English	1		
English for Work and	Play		
English for Life Skills			
Digital Essentials 1			
Digital Learning for P	arents		
Café Skills			
How to Build your ov	vn Business		
Basics of Commercia	l Cleaning		
Career Development			
Introduction to Com	munity Services		
			1
Course location:	☐ Melton	☐ Sunshine	☐ Other

1. APPLICANT DETAILS									
Title:			Mr	☐ Mrs	☐ Ms	☐ Other			
Single name only:			(Tick this box if you have one name only that cannot be written in t following format. Write your single name in the 'Family name section						
Family name:									
First name:									
Middle name:									
Preferred name	:								
Previous name	(if appl	icable):							
Date of birth:						(day/month/year)			
Mobile:					Phone:				
Email:				,					
Alternative email (optional):									
Usual residential	Buildi	ng/Property	name:						
address:	Flat/L	Jnit details:			Street/Lot	number:			
	Street	t name:							
	Subur	b:							
	State	/Territory:			Postcode:				
Postal address	Buildi	ng/Property	name:			,			
(if different from	Flat/L	Jnit details:			Street/Lot	number:			
residential address):	Street	t name:							
	Subur	b:							
	State	/Territory:			Postcode:				
COV/ID 10	4: ·					1			
COVID-19 vaccina									
☐ Fully vaccinate certificate sign				<i>mmunisation Register</i> mption form sighted		on status :			
certificate sighted medical exemption form sighted Permanent									
	☐ Temporary-valid to//								

2.	GENDER AND CULTURAL DIVERSITY							
Ger	nder:	☐ Inc	leterminate/Intersex/Unspecified					
In v	In what country were you born?							
	Australia							
	City of Birth:							
	Other, please specify:							
Citi	zenship							
	Australian citizen	aland o	citizen Permanent resident					
	Other, please specify:							
	•	igin? (For persons of both Aboriginal and Torres Strait					
	nder origin tick both Yes boxes.)							
	Yes, Aboriginal	res Str	ait Islander 🔲 No					
3.	EMPLOYMENT							
	the following categories, which BEST describe	s you	r current employment status? (Tick ONE box					
	y). If never employed, go to Section 4. casual, seasonal, contract and shift work, use the	curren	at number of hours worked per week to determine					
	ether full time (35 hours or more per week) or par		•					
	Full time employee		Employed – unpaid worker in family business					
	Part time employee/casual		Unemployed – seeking part time work					
	Self-employed – not employing others		Unemployed – seeking full time work					
	Self-employed – employing others		Not employed – not seeking employment					
Wh onl		ibes y	our current or recent occupation? (Tick ONE box					
	Managers		Clerical and administrative workers					
	Professionals		Sales workers					
	Technicians and trade workers		Machinery operators and drivers					
	Community and personal service workers		Labourers					
	Other							
	ich of the following classifications BEST descr k ONE box only)	ibes t	he industry of your current or recent employer?					
	Agriculture, Forestry and Fishing		Financial & Insurance Services					
	Mining		Rental, Hiring & Real Estate Services					
	Manufacturing		Professional, Scientific & Technical Services					
	Electricity, Gas, Water & Waste Services		Administrative & Support Services					
	Construction		Public Administration & Safety					
	Wholesale Trade		Education & Training					
	Retail Trade		Health Care & Social Assistance					
	Accommodation & Food Services		Arts & Recreation Services					
	Transport, Postal & Warehousing		Other Services					
	Information Media & Telecommunications							

4.	LANGUAGE								
	Do you speak a language other than English at home? If more than one language, indicate the language spoken most often								
	No, English only	Yes, Other,	please	specif	y:				
Pro	Proficiency in spoken English:								
	Very well	Well			Not well			J V	lot at all
	SCHOOLING								
	at is the highest level you	have success	fully C		ETED at scho	ol? Tic	k one	box	only
	Completed Year 12 or ed	quivalent			Completed Y	'ear 11	or eq	uival	lent
	Completed Year 10 or ed	quivalent			Completed Y	ear 9 (or equ	ivale	ent
	Completed Year 8 or bel	ow			Never attend	ded sch	nool		
Are	you still enrolled in second	ndary or senio	or seco	ondary	education?	☐ Ye	es [□ N	0
6.	DISABILITY								
		anyo a disabili	tu im	nairma	ent or long	☐ Ye	.c. \Box	l No	- Go to Section 7
	you consider yourself to l m condition?	iave a disabili	ty, iiii	рантне	ent or long-	–	:S 🗀	INO	- do to section /
	ES, then please indicate t cate more than one area		sabilit	y, impa	airment or lo	ng-terr	n con	ditio	n. You may
	Hearing/Deaf				Acquired bra	in imp	airme	nt	
	Physical				Vision				
	Intellectual				Medical cond	dition			
	Learning				Other – pleas	se spe	cify:		
	Mental health condition	S							
Is a	ssistance required?	☐ Yes		No					
If y	es, please specify:								
				_		_		_	
7.	PREVIOUS QUALIFICATION								
	re you SUCCESSFULLY con ow? If YES, tick ANY appli	•	f the q	_l ualific	ations listed		□ No	- Go	to Section 8
	Bachelor Degree or High	er Degree		Adva	nced Diploma	or Ass	ociate	Deg	gree
	Diploma or Associate Dip	ssociate Diploma — Certificate IV or Advanced Certificate/Technician							
	Certificate III (or Trade C	ertificate)		Certif	icate II				
	Certificate I	Other education (including certificates or overseas qualifications not listed above)							
Hav	ve you completed any of t	he above qua	lificati	ions ov	verseas?	☐ Ye	es [) N	o – Go to Section 8

If YES, have you had this qualification recognised in Australia?

☐ No – Go to Section 8

Yes

If YES, please specify level of qualification, e.g. Certificate, Degree, etc. and field of study e.g. Certificate III in individual Support, Bachelor of Arts in Sociology							
8. 9	STUDY REASON						
Of the following categories, select the one which BEST describes the main reason you are undertaking this course or traineeship or apprenticeship? (Tick ONE box only)							
	To get a job			I wanted	extra skill	s for my job	
	To develop my existing b	ousiness		To get int	to another	r course of stu	dy
	To start my own busines	S		For perso	nal intere	st or self-deve	lopment
	To try for a different care	eer		To get ski	ills for con	nmunity/volur	itary work
	To get a better job or pro	omotion		It was a r	equireme	nt of my job	
	Other reasons						
9. E	EMERGENCY CONTACT						
Nam	e:						
Rela	tionship to student:						
Mob	ile:		Phone:				
10. F	REFERRAL DETAILS						
Have	you been referred by a	Services provider?			Yes	□ No	
Prov	ider name:						
Case	manager:						
Phor	ne contact:						
Emai	il:						
_	e permission for a copy on to the Services Provide	•	artic	ipation to I	be	☐ Yes	□ No
					'		
11. [DOCUMENTS SUBMITTER	O AND SIGHTED					
OFFICE USE: The following original documents must be sighted and colour photocopies must be made for student file.							
	Proof of citizenship:						
	Australian Birth Certifica Citizenship certificate, Cu		-			•	stralian
	Proof of identification ar	nd principal place of re	eside	ence in Victo	oria:		
	If under 17 and not enro				Proof of Ag	ge cara.	
	If asylum seeker, a Safe I			-	y Protectio	n Visa (TPV) or	Bridging Visa

class E. (Student must be referred by Jobs Victoria Mentoring Service providers)

12. PRIVACY NOTICE

Djerriwarrh Privacy Policy is available on our website at <u>Djerriwarrh.org.au/Student Information</u> or request a copy from reception.

Why we collect your personal information

As a registered training organisation (RTO), we collect your personal information so we can process and manage your enrolment in a vocational education and training (VET) course with us.

How we use your personal information

We use your personal information to enable us to deliver VET courses to you, and otherwise, as needed, to comply with our obligations as an RTO.

How we disclose your personal information

We are required by law (under the National Vocational Education and Training Regulator Act 2011 (Cth) (NVETR Act)) to disclose the personal information we collect about you to the National VET Data Collection kept by the National Centre for Vocational Education Research Ltd (NCVER). The NCVER is responsible for collecting, managing, analysing and communicating research and statistics about the Australian VET sector.

We are also authorised by law (under the NVETR Act) to disclose your personal information to the relevant state or territory training authority.

How the NCVER and other bodies handle your personal information

The NCVER will collect, hold, use and disclose your personal information in accordance with the law, including the Privacy Act 1988 (Cth) (Privacy Act) and the NVETR Act. Your personal information may be used and disclosed by NCVER for purposes that include populating authenticated VET transcripts; administration of VET; facilitation of statistics and research relating to education, including surveys and data linkage; and understanding the VET market.

The NCVER is authorised to disclose information to the Australian Government Department of Education, Skills and Employment (DESE), Commonwealth authorities, State and Territory authorities (other than registered training organisations) that deal with matters relating to VET and VET regulators for the purposes of those bodies, including to enable:

- administration of VET, including program administration, regulation, monitoring and evaluation
- facilitation of statistics and research relating to education, including surveys and data linkage
- understanding how the VET market operates, for policy, workforce planning and consumer information.

The NCVER may also disclose personal information to persons engaged by NCVER to conduct research on NCVER's behalf.

The NCVER does not intend to disclose your personal information to any overseas recipients.

For more information about how the NCVER will handle your personal information please refer to the NCVER's Privacy Policy at www.ncver.edu.au/privacy.

If you would like to seek access to or correct your information, in the first instance, please contact your RTO using the contact details listed below.

DESE is authorised by law, including the Privacy Act and the NVETR Act, to collect, use and disclose your personal information to fulfil specified functions and activities. For more information about how the DESE will handle your personal information, please refer to the DESE VET Privacy Notice at https://www.dese.gov.au/national-vet-data/vet-privacy-notice.

Document owner: Compliance Current Issue 21 December 2021 Review Date: 21 December 2022

Surveys

You may receive a student survey which may be run by a government department or an NCVER employee, agent, third-party contractor or another authorised agency. Please note you may opt out of the survey at the time of being contacted.

Contact information

At any time, you may contact Dierriwarrh Community & Education Services to:

- request access to your personal information
- correct your personal information
- make a complaint about how your personal information has been handled
- ask a question about this Privacy Notice

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

Djerriwarrh Community & Education Services (Djerriwarrh) is required to provide the Department with student and training activity data. This includes personal information collected in the Djerriwarrh enrolment form and unique identifiers such as the Victorian Student Number (VSN) and the Commonwealth's Unique Student Identifier (USI).

Djerriwarrh provides data to the Department in accordance with the Victorian VET Student Statistical Collection Guidelines, available at <u>Department of Education and Training Victoria website</u>.

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 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).

Document owner: Compliance Current Issue 21 December 2021 Review Date: 21 December 2022

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 the Education Manager at Djerriwarrh in the first instance by phone (03) 8746 1000 or info@djerriwarrh.org.

Further information

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

For further information about Unique Student Identifiers, including access, correction and complaints, go to <u>Australian Government USI</u> website.

13.	13. PROMOTIONAL AND ADVERTISING PERMISSION							
Hov	How did you hear about the course/program?							
	Facebook		Word of Mouth (friends/relatives)					
	Job Active/Employment Services		Expos/Events					
	Brochure (on display)		Brochure (in letter box)					
	Internet search (e.g. Google)		☐ Centrelink					
	Djerriwarrh website							
_	re permission for Djerriwarrh Community & Edurmation relating to our courses and services.	ıcatio	on Services (Djerriwarrh) to contact me with					
"	Yes □ No							
I giv	re my permission to Djerriwarrh to use my (tick	all th	nat apply):					
	personal story	age	☐ name					
	for the purpose of promoting and advertising Djerriwarrh. This personal story/image/footage is/are in connection with courses or activities run by or connected to Djerriwarrh.							
If yo	ou wish to withdraw your consent at a future da	ate, p	olease email Djerriwarrh at <u>info@djerriwarrh.org</u>					

14. APPLICANT DECLARATION									
Please	Please read the following statements and acknowledge by ticking each item and signing below.								
	I declare that the information provided to Djerriwarrh Community & Education Services (Djerriwarrh) in this enrolment form is to the best of my knowledge true, correct and complete at the time of my enrolment								
	I acknowledge that providing any false information and/or failing to disclose any information relevant to my application for enrolment and/or failure to complete an application/enrolment form may result in the withdrawal of any offer, particularly as it relates to my eligibility to obtain an offer for government subsidised training and/or cancellation of enrolment at the discretion of Djerriwarrh								
	I authorise Djerriwarrh to release information regarding my enrolment to any government department and to other parties when it is legally obliged to do so								
	I authorise Djerriwarrh	to check available records to confirm informatio	n provide	d is correct					
	I acknowledge that I have read the Privacy Notice including the Victorian Government VET Student Enrolment Privacy Notice and consent to the collection, use and disclosure of my personal information as stated								
	cant's name: se print)								
Applic	cant's signature:		Date:						
Paren	t/Guardian Acknowled	gement							
	For applicants under the age of 18 at the time of enrolment, this form must be signed by a Parent/Guardian.								
	As the Parent/Guardian of applicant identified above, I confirm that all information provided on this application form is to the best of my knowledge true, correct and accurate.								
	As the Parent/Guardian of applicant identified above, I confirm that I have read, acknowledge and agree to the terms described in the privacy notice.								
	t/Guardian name: se print)								
Paren	t/Guardian signature:		Date:						

	Schedule of Fees									
Cou	Course Funding Codes (Tick where applicable)									
ACI	E ACFE funded		ACR ACFE funded - Rec	onnect	s	Fee for s	service			
Course Code Course			Funding Code			End Date	Fee			
1										
2										
3.										
				T	otal					
Am	enities (Photocopyir	ng/Consu	mables)				Fee			
Cou	urse 1									
Cou	urse 2									
Cou	urse 3									
				Amenities Tot	al					
Oth	Other Items Quantity Unit Price						Total			
Cou	urse 1 Materials/Kits/	'Resource	s/Workbooks							
Cou	urse 2 Materials/Kits/	'Resource	s/Workbooks							
Cou	urse 3 Materials/Kits/	'Resource	s/Workbooks							
Oth	ner - please specify									
	Other Total									
	Grand Total									
Inv	oicing Authority (if a	pplicable	, please attach)							
Bus	siness Name									
Cor	ntact Name		Phone							