

Form: Enrolment Form_v7.5 Form Number: 042D Date Created: March 2012 Date Reviewed: June 2021 Version: 7.5

	. COURSE DETAILS						
Cours	Course Code and Name (please tick the course you are enrolling in)						
	CHC33015 Certificate III	in Individual Support (Ageing)		HLTAID011 Provide First Aid			
	CHC43015 Certificate IV	' in Ageing Support		CHCSS00070 Assist Clients with Medication Skill Set			
	CHC43415 Certificate IV	in Leisure & Health		CHCSS00114 Entry into Care Roles Skill Set			
BSB40520 Certificate IV in Leadership and Management			CHCSS00105 Palliative Approach Skill Set				
BSB50420 Diploma of Leadership and Management			CHCAGE005 Provide Support to People Living with Dementia				
	Non-accredited Contribute to the Care of People with Diabetes			Other – please specify:			
Course Start Date							
Cours	Course Delivery Wollongong Shoalhaven			CT Online Other			

2. ENROLMENT FORM CHECKLIST

Have	Have you provided all the information required?			
	Course details (Section 1)			
	Manager details – IRT employees only (Section 3)			
	Unique Student Identifier (USI) (Section 14)			
	Supporting evidence e.g. Proof of ID, proof of citizenship (Section 15)			
	Sign appropriate sections (Sections 11, 13, 16)			

3. STUDENT DETAILS

* 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 and want IRT Academy to apply for a USI on your behalf, you must write your name, including any middle names, exactly as written in the identity document you choose to use for this purpose. See section on the USI at the end of this form for a detailed explanation. Title: Miss 🗌 Mrs Ms 🗌 Mr 🗌 Other: Tick this box if you have one name only that cannot be written in the following format. Single Name only Please write your single name in the 'Surname' section below. Second Given First Given Name: (middle) Name: Family name (surname): Date of Birth: Gender: ☐ Male Female ☐ Other Home Phone: Email: Alternative Mobile: email (optional) 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. Flat/Unit Building/Property name: Details: Street or lot number: Street name: Postcode: Suburb, locality or town: State/Territory:

What is your postal address (if different from above)?							
Building/Property name:		Flat/Unit Details:					
Street or lot number:		Street name:					
Suburb, locality or town:		State/Territory:		Postcode:			
Emergency Contact Name:		Phone:		Relationship:			

4. IRT EMPLOYEES	ONLY – Manager to complete					
IRT Employee Position:		Employment status:	Part-time	Fulltime		
IRT Employment Site:	IRT Employment Site:					
IRT Manager Name:						
I give permission for the above employee to complete the specified course with IRT Academy Yes No						
IRT Manager Signature:			Date:			

5. LANGUAGE AND CULTURAL DIVERSITY

In which country were you born?	Australia 🗌 (1101) 🛛 Other – please specify:				
City of Birth:					
Country of Citizenship:	Australia Other – please specify:				
Citizenship status:	Australian Citizen Australian Permanent Resident New Zealand Citizen Other – please specify:				
Are you in Australia on a Visa?	 Student TU / 500 Other – please specify Visa subclass and attach to your enrolment: 				
Are you of Aboriginal or Torres Strait Islander origin?	 □ No (4) □ Yes, Aboriginal (1) □ Yes, Torres Strait Islander (2) (3) (yes to both) 				
Do you speak a language other than English at home?	 No, English only (1201) Yes, other – please specify: 				
How well do you speak English?	Very well Well Not well Not at all				

6. DISABILITY

Do you consider yourself to have a disability, impairment or long-term condition?	Yes No – please go to next section		
If Yes, please indicate your condition:	Hearing/deaf (11) Physical (12) Intellectual (13) Learning (14) Mental Illness (15) Acquired brain impairment (16) Vision (17) Medical Condition (18) Other (19):		
Please indicate the disability assessment type and attached evidence:	 Recipient of a disability support pension Assessed as a student with a disability Dependent of a person in receipt of a disability support pension 		

7. CONCESSION INFORMATION (required for government subsidised training)

Do you live in NSW social housing?	Yes No			
Are you on the NSW housing register?	Yes No			
Concession	Are you currently a welfare recipient?	Yes 🗌 No – please go to next section		
	Age pension	Austudy		
	Carer payment (not Carer	Disability support payment		
	allowance/adjustment payment)			
	Farm household allowance	Family tax benefit Part A (maximum)		
		rate)		
	JobSeeker payment	Parenting payment (Single)		
	Special benefit	Veterans' affairs pensions		
	Veterans' children education scheme	Widow allowance		
	Youth allowance	Other please specify:		
	Please attach a letter from the Department of Human Services (Centrelink)			
	confirming receipt of the benefit.			

8. EDUCATION							
Schooling What is your highest COMPLETED school level? (Tick ONE box only)							
	highest school level you have a	econdary education, the <i>Highest school level completed</i> refers to the ctually completed and not the level you are currently undertaking. For Year 10 the <i>Highest school level completed</i> is Year 9.					
	Year 12 or equivalent	12					
	Year 11 or equivalent		□ 11				
	Year 10 or equivalent		10				
	Year 9 or equivalent		09				
	Year 8 or below		08				
	Never attended school		02				
	Are you still enrolled in seconda secondary education?	-	🗌 Yes	I am a r home scho		🗌 No	
	Have you SUCCESSFULLY con qualifications listed below?	mpleted any of the	🗌 Yes	🗌 No – ple	ease go to ne	ext section	
	If Yes, then tick ANY applicable						
	Bachelor degree or higher degree	008					
	Advanced diploma or associate deg	410					
	Diploma (or associate diploma)	420					
	Certificate IV (or advanced certificate	□ 511					
	Certificate III (or trade certificate)	e certificate)		514			
	Certificate II	tificate II		521			
	Certificate I		524				
	Other education (including certificates or overseas qualifications not listed above)		990				
	When were the above qualifications completed?		While attending school		After lea	aving school	
Funded/Subsidised Training	Have you undertaken any other subsidised courses this calendate	🗆 Yes 🗌 No					
	ION OF PRIOR LEARNING AND					a dava tiba t	
	If you have previously completed accredited training or have a combination of experience, skills, training and knowledge that you have built up in your career, you may be eligible for Credit Transfer or Recognition of Prior Learning.						
Do you wish to apply for Credit Transfer?							
Do you wish to seek	Recognition of Prior Learning?	□ No □ Yes – your Educator will issue you with a RPL Guide					

10. EMPLOYMENT & STUDY REASON			
Of the following categories, which BEST describes your	Full-time employee	01	
current employment status? (Tick ONE box only)	Part-time employee		02
For casual, seasonal, contract and shift work, use the	Self employed - not employing others	3	03
current number of hours worked per week to determine	Self employed – employing others		04
whether full time (35 hours or more per week) or part-time	Employed – unpaid worker in a family	business	05
employed (less than 35 hours per week).	Unemployed – seeking full-time work		06
	Unemployed – seeking part-time work	07	
	Not employed – not seeking employm	08	
If you are employed as an aged care worker, please specify the area of aged care:	ify Residential Care Home Care		
If you are employed as an aged care worker, please tick the	Personal care (showering, Leisure and lifestyle		activities
duties you currently undertake:	grooming, continence care etc.) Assist in the adminimedication		tration of
	Cleaning Other, please specify:		
	Maintenance		
	Preparing and serving food		

Of the following categories, which BEST describes your main reason for undertaking this course/traineeship/apprenticeship? (Tick ONE box only)	To get a job	01
	To develop my existing business	02
	To start my own business	03
	To try for a different career	04
	To get a better job or promotion	05
	It was a requirement of my job	06
	I wanted extra skills for my job	07
	To get into another course of study	08
	For personal interest or self-development	12
	To get skills for community/voluntary work	13
	Other reasons	11

11. PRIVACY NOTE

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 <u>www.ncver.edu.au/privacy</u>.

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.

<u>Surveys</u>

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 IRT Academy at;

- T 134 478
- W https://www.irt.org.au/careers-study/irt-academy/
- E irtacademy@irt.org.au

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

I have read and understand the terms of this Privacy Note.

Student/Parent/Guardian Signature: _

Date:

12. CONSENT TO USE AND DISCLOSUE OF PERSONAL INFORMATION - SUBSIDISED TRAINING IN NSW STUDENTS ONLY

Where a Smart and Skilled subsidy applies please note that this training is subsidised by the NSW Government.

By agreeing to receiving <u>NSW Government Smart and Skilled</u>* subsidised training the student must be aware of, and agree to the following:

Under the National Vocational Education and Training Regulator (Data Provision Requirements) Instrument 2020, IRT Academy is required to collect personal information (information or an opinion about me), collected from me, my parent or guardian, such as my name, Unique Student Identifier, date of birth, contact details, training outcomes and performance, sensitive personal information (including my ethnicity or health information) and other enrolment and training activity-related information and disclose that Personal Information to the National Centre for Vocational Education Research Ltd (NCVER).

My Personal Information (including the personal information contained on my enrolment form and my training activity data) may be used or disclosed by IRT Academy for statistical, regulatory and research purposes. IRT Academy may disclose my personal information for these purposes to third parties, including:

- School if I am a secondary student undertaking VET, including a school-based apprenticeship or traineeship;
- Employer if I am enrolled in training paid by my employer;
- Commonwealth and State or Territory government departments and authorized agencies, including the NSW Department of Education (Department);
- NCVER;
- Organisations (including the Department) 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.

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

NCVER will collect, hold, use and disclose my 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 <u>www.ncver.edu.au</u>).

The Department may disclose my Personal Information to other Australian government agencies, including those located in States and Territories outside New South Wales.

The above government agencies may use my Personal Information for any purpose relating to the exercise of their government functions, including but not limited to the evaluation and assessment of my training, the determination of my eligibility to receive subsidised training or for any Fee Exemptions or Concessions. My Personal Information may also be disclosed to other third parties if required by law.

I also acknowledge and agree that the Department may contact me by telephone, email or post, during or after I have ceased subsidised training with IRT Academy for the purposes of evaluating and assessing my subsidised training.

I declare that the information I have provided to the best of my knowledge is true and correct.

I consent to the collection, use and disclosure of my Personal Information in the manner outlined above.

For students in receipt of subsidised training (i.e. funded by a State/Federal Government body) please note the following contact details for more information:

• NSW Smart and Skilled – W: https://smartandskilled.nsw.gov.au/ Ph: 1300 772 104

11a. SUBSIDISED TRAINING - ACT STUDENTS ONLY

Skilled Capital is an ACT Government training initiative, funded by the ACT and Australian Governments.

See Section 10. Privacy notice for information that complies with ACT Skilled Capital guidelines.

For more information about Skilled Capital subsidised training please note the following contact details:

• ACT Skilled Capital https://www.skills.act.gov.au/students Ph.: 6205 8555 (during business hours)

13. UNIQUE STUDENT IDENTIFIER (USI) PRIVACY NOTE

From 1 January 2015, IRT Academy 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 on computer or mobile device.

If you would like IRT Academy to apply for a USI on your behalf you must authorise us to do so and declare that you have read the privacy information at https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-behalf. You must also provide some additional information below so that we can apply for a USI on your behalf.

In accordance with section 11 of the *Student Identifiers Act 2014*, IRT Academy will securely destroy personal information which we collect from individuals solely for the purpose of applying for a USI on their behalf as soon as practicable after we have made the application or the information is no longer needed for that purpose.

14. UNIQUE STUDENT IDENTIFIER (USI) - FOR ACCREDITED TRAINING ONLY

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/fags/i-have-forgotten-my-usi/.

Have you been issued with a USI previously?	 ☐ Yes, please provide your 10 digit USI: ☐ No - please read the Privacy Notice below a 	and complete th	ne following in	formation:
I have read and I consent to the collection, use and disclosure of my personal information (which may include sensitive information) pursuant to the information detailed at < <u>https://www.usi.gov.au/documents/privacy-notice-when-rto-applies-their-b</u>				
Student Full Name:				
Student Signature:		Date:	/	/

15. PROOF OF ELIGIBILITY – FOR SUBSIDISED ACCREDITED TRAINING

The following section outlines the proof of eligibility requirements to access government-subsidised training. Depending on the answers from Sections 4, 5, 6 & 7, you are required to provide evidence to support your response.

Category 1 - You must provide one form of identity to prove you live or work in Australia:

Living or working	Australian Driver's License	State:	License Number:	
in Australia -	Proof of ID Card	State	Card Number:	

Category 2 – at least one piece of evidence required from this category. Please provide copies and details to support your enrolment:

Citizenship: Australian citizen, New Zealand citizen and permanent Australian resident	Medicare Card	Medicare Card Number:			Ref #
		Medicare Card Colour:	Green	Blue	
		Medicare Expiry Date:	/	/	
	Aus/NZ Passport	Passport Number:			
	Certificate of evidence of resident status	Card Number:			
Humanitarian visa holder and Partner visa holder (Refugee or asylum seeker)	Non-Australian Passport	Passport Number:			
	Visa documentation	Document Number:			
	ImmiCard	Card Number:			
	Bridging visa	Document Number:			
Concession/disabil ity	Concession card	Card Number:			
Home school students	Home schooling registration	Period of time for home schooling:			

16. STUDENT ENROLMENT DECLARATION

Statistical Information Statement

We are committed to maintaining your privacy and confidentiality at all times and complying with the NSW Privacy and Personal Information Protection Act 1998 and the Federal Privacy Act 1988. Student information will not be provided to anyone unless you have provided written consent for us to do so or the information is allowed or required by law to be provided. This may occur when training attracts Government Incentives and may include; Federal and State Education Departments (including; State Training Services), Trainee employers and Australia Skills Quality Authority.

I declare that all information provided in this enrolment form is true and accurate and that I have read and understood the Terms and Conditions of enrolment contained in this Enrolment Form, the Student Handbook and Fees & Charges Schedule.								☐ Yes	🗌 No
I give permission to share my information as per the Statistical Information Statement above.								🗌 Yes	🗌 No
I give permission for IRT Academy to verify Certificates or Statement of Attainments that have been issued by an RTO other than IRT Academy.								🗌 Yes	🗌 No
IRT Employees Only: I give permission for IRT Academy to share my course progress with my employer and other relevant IRT Group Managers / Team Leaders.							🗌 Yes	🗌 No	
I have read and understood IRT Academy's consumer protection policy as outlined in the Student Handbook: https://www.irt.org.au/careers-study/irt-academy/resources/							🗌 Yes	🗌 No	
I declare that the information I have provided to the best of my knowledge is true and correct.							🗌 Yes	🗌 No	
I consent to the collection, use and disclosure of my Personal Information in the manner outlined above.							🗌 Yes	🗌 No	
Student Full Name:			Signature:			Date		/	/
For students under the age of 18 - Full name of Parent / Guardian:									
Parent/Guardian Signature:						Date		/	/

Please scan and email your Enrolment Form to irtacademy@irt.org.au