

ADEPT TRAINING ENROLMENT FORM

COURSE DETAILS

Course Name: _____ Start Date: _____ Code: _____

PERSONAL DETAILS

Single Name

Surname: _____ Given Name: _____

Other Names: _____

Title: Mr Mrs Miss Ms Dr Gender: M F Other

DOB (dd/mm/yyyy): ___/___/____ USI: _____

CONTACT DETAILS

Town/City of Birth: _____

Home Phone: _____ Work Phone: _____

Mobile: _____ Email: _____

Preferred contact method: Email Mobile Mail

Home Address:

Unit _____ Building Name _____ Number _____

Street _____ Suburb _____

State _____ Postcode _____

Postal Address: (if different from above):

Unit _____ Building Name _____ Number _____

Street _____ Suburb _____

State _____ Postcode _____

STATUS**Country of Birth:** _____**Indigenous Status:**Aboriginal Torres Strait Islander Aboriginal AND Torres Strait Islander Neither Aboriginal nor Torres Strait Islander **Language spoken at home:** _____**Proficiency in spoken English:** Very Well Well Not Well Not at all **Education:**At high school currently? Yes No Highest **HIGH SCHOOL** level completed Year 10 Year 11 Year 12 Year 9 or below

Year completed _____ Name of school _____

Employment Status: Full Time Part Time Unemployed (seeking full time work)
Unemployed (seeking part time work) Not Employed (not seeking employment)
Self Employed Employer Employed – unpaid worker in family business **Do you have a disability?** Yes (If yes, please tick) No Acquired brain Impairment Hearing/Deaf Intellectual Learning Medical condition Mental illness Physical Vision Unspecified Other **Do you require additional support?** Yes No

If yes, please describe _____

Prior Education? Yes (If yes, please tick below) No Advanced Diploma or Associate Degree Bachelor Degree or Higher Certificate I Certificate II Certificate III Certificate IV Diploma or Associate Diploma Level Miscellaneous Education **Emergency Contact** _____ **Relationship** _____**Phone** _____ **Mobile** _____**Citizenship Status:** _____**Study Reason:** 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 course of study Other reasons For personal interest or self-development To get skills for community/voluntary work

CREDIT TRANSFER/RECOGNITION OF PRIOR LEARNING

Do you wish to apply for Credit Transfers? Yes (If yes, please tick) No

Do you wish to apply for RPL? Yes (If yes, please tick) No

Applications for Credit Transfers or Recognition of Prior Learning must be made at the time of enrolment.

PAYMENT AND BANK DETAILS

Total Payable: \$ _____ Payment Method: _____

I authorise Adept Training to charge my credit card the amount of: \$ _____

Card details:

Number _____

Expiry (mm/yy) ____ / ____ CVV _____

Cardholder Name _____ Signature _____

(As it appears on the card).

Please choose your course carefully and read the Fees and Refund Policy in the Student Handbook available on our website or at our office www.adepttraining.com.au

STUDENT DECLARATION AND CONSENT

Prior to enrolment I was informed about training, assessment and support services and about my rights and obligations. I have been provided with access to the Student Handbook and advised further information is available on the Adept Training website.

I have read and understood all Adept Training's terms and conditions (available on Adept website www.adepttraining.com.au and the Student Handbook) and I will abide by these terms and conditions throughout my training with Adept Training.

Under the *Data Provision Requirements 2012*. Adept Training 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 Adept Training for statistical, regulatory and research purposes. Adept Training 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;
- facilitation 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 a student survey which may be run by a government department or an NCVET employee, agent, third-party contractor or another authorised agency. Please note you may opt out of the survey at the time of being contacted.

We are required by law (under the National Vocational Education and Training Regulator Act 2011 (Cth) (NVET 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.

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 NVET 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.

NCVER is authorised to disclose information to the Australian Government Department of Employment and Workplace Relations (DEWR), 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.

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

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

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

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

In supplying the requested information and signing below, I consent to disclosure of this information to government departments and third parties for these purposes.

STUDENT DECLARATION AND CONSENT

I hereby agree to the above declaration and to pay for the above course/s, in accordance with the payment specified, on the date(s) due.

I understand that overdue fees will incur a 10% penalty. I am aware if unable to complete the course the above fees and charges will still apply.

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 accordance with the Privacy Notice above.

Name: _____ **Signature:** _____

Date: _____

Note: If under 18 years of age at the time of this declaration, then the signature of a guardian is required.

Name of Guardian: _____ Signature of Guardian: _____

Date: _____

**Parental/guardian consent required for all students under the age of 18*