



## STUDENT ENROLMENT FORM – OZ CARE TRAINING PTY LTD – RTO 45530

Unique Student Identifier:

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If you have a USI please provide it in this box. If you do not have a USI, you will need to go to <https://www.usi.gov.au/students/get-a-usi> and create one for yourself. If you require assistance from the RTO, you will need to let us know. We can create a USI for you with your permission and with the required identification.

### Course Applied For

Course Code and Name	Select Course	Confirm if you have access to the internet and a laptop or PC.
HLTAID001 Provide cardiopulmonary resuscitation	<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
HLTAID003 Provide first aid	<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
HLTAID004 Provide an emergency first aid response in an education and care setting	<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
HLTINFCOV001 Comply with infection prevention and control policies and procedures	<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
CHC33015 Certificate III in Individual Support	<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
CHC43015 Certificate IV in Ageing Support	<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
CHC43115 Certificate IV in Disability	<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you wish to apply for Recognition of Prior Learning (RPL)? Read the Student Handbook for a full explanation of the recognition and Credit Transfer process.		
		<input type="checkbox"/> YES <input type="checkbox"/> NO

### Personal details

#### 1. Enter your full name \*

Single name only  (Tick this box if you have one name only that cannot be written in the following format. Write your single name in the 'Family name section).

Family name (surname) \_\_\_\_\_

First given name \_\_\_\_\_

Second given name (middle) \_\_\_\_\_

\* 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 Oz Care Training 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.**

#### 2. Enter your birth date

Day/month/year | | |

#### 3. Gender (Tick ONE box only)

Male

Female

Other

#### 4. Enter your contact details

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_

Mobile \_\_\_\_\_ Email address \_\_\_\_\_

Alternative email address (optional) \_\_\_\_\_

**5. 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.

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.

Building/property name \_\_\_\_\_  
 Flat/unit details \_\_\_\_\_  
 Street or lot number (e.g. 205 or Lot 118) \_\_\_\_\_  
 Street name \_\_\_\_\_  
 Suburb, locality or town \_\_\_\_\_  
 State/territory \_\_\_\_\_  
 Postcode \_\_\_\_\_

**6. What is your postal address (if different from above)?**

Building/property name \_\_\_\_\_  
 Flat/unit details \_\_\_\_\_  
 Street or lot number (e.g. 205 or Lot 118) \_\_\_\_\_  
 Street name \_\_\_\_\_  
 Postal delivery information (e.g. PO Box 254) \_\_\_\_\_  
 Suburb, locality or town \_\_\_\_\_  
 State/territory \_\_\_\_\_  
 Postcode \_\_\_\_\_

**Language and cultural diversity**

**7. In which country were you born?**

Australia  \_\_\_\_\_  
 Other – please specify \_\_\_\_\_

**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 and 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  Y \_\_\_\_\_  
 No  N **No – Go to question 12** \_\_\_\_\_

11. If you indicated the presence of a disability, impairment or long-term condition, please select the area(s) in the following list:

(You may indicate more than one area) Please refer to the Disability supplement for an explanation of the following disabilities.

Hearing/deaf	<input type="checkbox"/>
Physical	<input type="checkbox"/>
Intellectual	<input type="checkbox"/>
Learning	<input type="checkbox"/>
Mental illness	<input type="checkbox"/>
Acquired brain impairment	<input type="checkbox"/>
Vision	<input type="checkbox"/>
Medical condition	<input type="checkbox"/>
Other	<input type="checkbox"/>

## Schooling

12. What is your highest COMPLETED school level? (Tick ONE box 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	<input type="checkbox"/>	
Year 11 or equivalent	<input type="checkbox"/>	
Year 10 or equivalent	<input type="checkbox"/>	
Year 9 or equivalent	<input type="checkbox"/>	
Year 8 or below	<input type="checkbox"/>	
Never attended school	<input type="checkbox"/>	Never completed any primary or secondary level education – go to question 14

13. Are you still enrolled in secondary or senior secondary education?

Yes	<input type="checkbox"/> Y
No	<input type="checkbox"/> N

## Previous qualifications achieved

14. Have you SUCCESSFULLY completed any of the qualifications listed in question 15?

Yes	<input type="checkbox"/> Y	
No	<input type="checkbox"/> N	No – go to question 16

15. If YES, tick ANY applicable boxes.

Bachelor degree or higher degree	<input type="checkbox"/>
Advanced diploma or associate degree	<input type="checkbox"/>
Diploma (or associate diploma)	<input type="checkbox"/>
Certificate IV (or advanced certificate/technician)	<input type="checkbox"/>
Certificate III (or trade certificate)	<input type="checkbox"/>
Certificate II	<input type="checkbox"/>
Certificate I	<input type="checkbox"/>
Other education (including certificates or overseas qualifications not listed above)	<input type="checkbox"/>

## Employment

16. Of the following categories, which BEST describes your current employment status?

(Tick ONE box only)

For casual, seasonal, contract and shift work, use the current number of hours worked per week to determine whether full time (35 hours or more per week) or part-time employed (less than 35 hours per week).

Full-time employee	<input type="checkbox"/>
Part-time employee	<input type="checkbox"/>
Self employed – not employing others	<input type="checkbox"/>
Self employed – employing others	<input type="checkbox"/>
Employed – unpaid worker in a family business	<input type="checkbox"/>
Unemployed – seeking full-time work	<input type="checkbox"/>
Unemployed – seeking part-time work	<input type="checkbox"/>
Not employed – not seeking employment	<input type="checkbox"/>

## Study reason

17. Of the following categories, select the one which BEST describes the main reason you are undertaking this course/traineeship/apprenticeship (Tick ONE box only)

To get a job	<input type="checkbox"/>
To develop my existing business	<input type="checkbox"/>
To start my own business	<input type="checkbox"/>
To try for a different career	<input type="checkbox"/>
To get a better job or promotion	<input type="checkbox"/>
It was a requirement of my job	<input type="checkbox"/>
I wanted extra skills for my job	<input type="checkbox"/>
To get into another course of study	<input type="checkbox"/>
For personal interest or self-development	<input type="checkbox"/>
To get skills for community/voluntary work	<input type="checkbox"/>
Other reasons	<input type="checkbox"/>

## STUDENT DECLARATION

- STUDENT HANDBOOK:** Please read the student handbook in full, which is available at reception desk or at <http://www.ozcaretraining.edu.au/download/> prior to signing.
- REFUND POLICY AND FEE SCHEDULE:** Please read the refund policy in the student handbook which is available at reception desk or at <http://www.ozcaretraining.edu.au/download/> prior to signing.
- IMPORTANT INFORMATION:** All enrolments are confirmed in writing before the course starts, giving details of the course start times and venue. In the unlikely event you do not receive confirmation of a course prior to the commencement date, please contact us immediately.
- PRIVACY NOTICE:** The primary purpose of collecting personal information that you supply on this form is to process your registration and allow you to study under mandatory record keeping and reporting requirements. The Privacy Notice is at the end of this enrolment form, you must read it before signing.
- MOBILE PHONES:** We adopt a no mobile phone policy during class time; phones switched off and placed out of sight. Breaching may see you removed from class.
- I have read the student handbook and understand my rights and responsibilities in relation to assessment, student fees, refunds and complaints and appeals. I confirm I have been given all up front course information to allow me to make a valid choice and informed choice to study with Oz Care Training. This includes being given information on the RPL process, the course structure, duration and cost. By signing below, I am confirming that I understand these elements in full and that my declaration above is true and accurate.

### I have read and understand the Policies and Statements above:

Student Name: ..... Signature: .....

Date ...../...../.....

**For Students under 18 years of age a Parent or Guardian must sign below.**

Guardian Name: ..... Signature: .....

Date ...../...../.....

## Privacy Notice

### 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. If you are unwilling to provide the information in this form, we understand and respect your right to refuse to do so, but we will not be able to offer you training with Oz Care Training, given our obligations to capture, retain and provide data as required as an RTO.

### 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. In addition, Oz Care Training does not provide personal information to overseas recipients.

### 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](http://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>. If you are unable to access the Departments website, we can provide you with a hard copy of the notice.

### 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 Oz Care Training Pty Ltd, <https://training.gov.au/Organisation/Details/45330> 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

A copy of our own Privacy Policy can be found at <https://www.ozcaretraining.edu.au> or a copy can be sourced from administration staff at reception.