



Office Use Only

Course Code : CL _____

Module Code: _____

STUDENT TRAINING ENROLMENT FORM

Please fill out this form for all enrolled courses this information is only use for statistical purposes and internal use.
 This information is required by organisation receiving Government funds and all information is confidential and will be used to ensure ongoing quality and qualification issuance. The data is not forwarded to any other party in exception of the national statistical database to inform future federal and Victorian funding in Vocational and Pre-accredited training.

<p>Course Title: _____</p> <p>(Ms) (Miss) (Mrs) (Mr) (other) (N/A) <i>please circle</i></p> <p>Surname: _____</p> <p>Address: _____</p> <p>Phone (AH) _____</p> <p>Phone (Bus) _____</p> <p>Date of Birth: _____</p> <p>Language spoken at home: _____</p> <p>Email Address: _____</p>	<p>Enrolment Date: _____</p> <p>Gender: (Male)(Female)(LBGTQIA+) <i>please circle</i></p> <p>Given Name: _____</p> <p>Suburb _____</p> <p>Postcode _____</p> <p>Mobile _____</p> <p>Country of Birth _____</p> <p>*Is Child Care Required: (Yes) (No)</p> <p>*Number of children: _____</p>
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For 25years and under ONLY- Are you new to the Victorian Education System or do you not have your Victorian Student Number?

Yes I am new to the Victorian Education System. I never attended a Victorian School, TAFE or other Training provider

Please provide your Victorian Student Number: VSN: _ _ _ _ _ (<25yrs)

Do you have a Permanent or Significant Disability: YES NO
 (Please Circle) Hearing Vision ABI Physical Mental health Other

Are you (Please Circle) Permanent Resident or Temporary Visa or Student Visa

Employment Status *(Please Tick one)*

- Employed Full Time - Employed – Unpaid Family Worker

Occupation: _____

- Employed (Part Time) - Unemployed Seeking Full Time Work

Occupation: _____

- Self Employed – Not hiring others - Unemployed Seeking Part Time Work

Occupation: _____

- Self Employed – employing others - Not Employed/Not Seeking Employment

Occupation: _____

Prior Education What is your **highest** secondary school level? **(Please Circle)**

(Below Year 8) (Year 9 or Equivalent) (Year 10) (Year 11)(Year 12) **Year you Left School**

Since Leaving School, have you completed any qualifications? YES NO

If YES, please tick applicable boxes:

Bachelor Degree of Higher Degree in:

Advance Diploma or Associate Degree in:

Diploma Certificate IV

Certificate III Certificate II

Certificate I Miscellaneous Education

*Employment Industry/Occupation: _____ (eg: health, retail, education, admin, Trade)

Are you claiming a concession rate for this class YES NO

If **Yes**, (please tick applicable boxes)

- | | |
|--|---|
| H Health Care Card <input type="checkbox"/> | K Job Seeker Not Concession Card <input type="checkbox"/> |
| P Pension Concession Card <input type="checkbox"/> | V Veteran Gold Card <input type="checkbox"/> |
| M Prisoner <input type="checkbox"/> | X Community Based Order <input type="checkbox"/> |
| O Other <input type="checkbox"/> | Z None <input type="checkbox"/> |

Reason for Studying: (please tick applicable boxes)

- | | |
|--|---|
| For Personal Interest or Self Development <input type="checkbox"/> | I wanted extra skills for my job <input type="checkbox"/> |
| It was a requirement for my job <input type="checkbox"/> | To develop my existing Business <input type="checkbox"/> |
| To get a better job or position <input type="checkbox"/> | To get a job <input type="checkbox"/> |
| To get into another course or study <input type="checkbox"/> | To start my own business <input type="checkbox"/> |
| To try for a different career <input type="checkbox"/> | Other reasons <input type="checkbox"/> |

Indigenous Status: (please tick applicable boxes)

- | | |
|--|---|
| Aboriginal <input type="checkbox"/> | Torres Strait Islander <input type="checkbox"/> |
| Aboriginal & Torres Strait Islander <input type="checkbox"/> | Not Neither <input type="checkbox"/> |

Level of English (please tick applicable boxes) Very Well Well Not Well Not at All

PAYMENTS: Deposits on enrolment is required for 'ALL' courses being 25%.
 Amounts **refundable** if the course is cancelled - less 10% for administration purposes.
Deposit not refunded if notice has not been given to non-commencement by student by one week's notice.

Payment in FULL is required prior to or on day of course commencement. If you require assistance or unable to make payment, please speak to Co-ordinator. 'ALL' course commencements are subject to student enrolments. Students enrolled requiring '**CHILDCARE**' a **cost of \$10.00 per child** per session Childcare Subsidy Available (**CCS**). Administration can assist you with CCS process and attendance. If you are unable to attend a Class, we request you inform Centre of absence as soon as possible.

On signing this Enrolment I (student name) understand and accept to the above requests.

Applicants Signature: Date:

Office use only: Received date: Payment Rc No.